

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (1-21)**  
**STATE: IA**  
**APPLICATION YEAR: 2006**

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- [FORM 1 - SF424](#)
- [FORM 2 - MCH BUDGET DETAILS](#)
- [FORM 3 - STATE MCH FUNDING PROFILE](#)
- [FORM 4 - BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED AND SOURCES OF FEDERAL FUNDS](#)
- [FORM 5 - STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES](#)
- [FORM 6 - NUMBER AND PERCENTAGE OF NEWBORN AND OTHERS SCREENED, CASE CONFIRMED, AND TREATED](#)
- [FORM 7 - NUMBER OF INDIVIDUALS SERVED \(UNDUPLICATED\) UNDER TITLE V](#)
- [FORM 8 - DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX](#)
- [FORM 9 - STATE MCH TOLL-FREE TELEPHONE LINE DATA](#)
- [FORM 10 - TITLE V MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT STATE PROFILE FOR FY 2004](#)
- [FORM 11 - NATIONAL AND STATE PERFORMANCE MEASURES](#)
- [FORM 12 - NATIONAL AND STATE OUTCOME MEASURES](#)
- [FORM 13 - CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CHILDREN WITH SPECIAL HEALTH CARE NEEDS](#)
- [FORM 14 - LIST OF MCH PRIORITY NEEDS](#)
- [FORM 15 - TECHNICAL ASSISTANCE \(TA\) REQUEST AND TRACKING](#)
- [FORM 16 - STATE PERFORMANCE/OUTCOME MEASURE DETAIL SHEETS](#)
- [FORM 17 - HEALTH SYSTEM CAPACITY INDICATORS \(01 THROUGH 04,07,08\) - MULTI-YEAR DATA](#)
- [FORM 18](#)
  - [MEDICAID AND NON-MEDICAID COMPARISON](#)
  - [MEDICAID ELIGIBILITY LEVEL \(HSCI 06\)](#)
  - [SCHIP ELIGIBILITY LEVEL \(HSCI 06\)](#)
- [FORM 19](#)
  - [GENERAL MCH DATA CAPACITY \(HSCI 09A\)](#)
  - [ADOLESCENT TOBACCO USE DATA CAPACITY \(HSCI 09B\)](#)
  - [OVERWEIGHT AND OBESITY DATA CAPACITY \(HSCI 09C\)](#)
- [FORM 20 - HEALTH STATUS INDICATORS 01-05 - MULTI-YEAR DATA](#)
- [FORM 21](#)
  - [POPULATION DEMOGRAPHICS DATA \(HSI 06\)](#)
  - [LIVE BIRTH DEMOGRAPHICS DATA \(HSI 07\)](#)
  - [INFANT AND CHILDREN MORTALITY DATA \(HSI 08\)](#)
  - [MISCELLANEOUS DEMOGRAPHICS DATA \(HSI 09\)](#)
  - [GEOGRAPHIC LIVING AREA DEMOGRAPHIC DATA \(HSI 10\)](#)
  - [POVERTY LEVEL DEMOGRAPHIC DATA \(HSI 11\)](#)
  - [POVERTY LEVEL FOR CHILDREN DEMOGRAPHICS DATA \(HSI 12\)](#)
- [NEW STATE PERFORMANCE AND OUTCOME MEASURES FOR NEW NEEDS ASSESSMENT PERIOD](#)

<b>APPLICATION FOR FEDERAL ASSISTANCE</b>		2. DATE SUBMITTED <b>7/15/2005</b>		APPLICANT IDENTIFIER	
1. TYPE OF SUBMISSION:  Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction		3. DATE RECEIVED BY STATE		STATE APPLICATION IDENTIFIER	
		4. DATE RECEIVED BY FEDERAL AGENCY		FEDERAL IDENTIFIER	
5. APPLICANT INFORMATION					
Legal Name: <b>Iowa Department of Public Health</b>			Organizational Unit: <b>Division of Health Promotion and Chronic Disease</b>		
Address (give city, county, state and zip code) <b>321 East 12th Street Lucas State Office Building Des Moines, IA 50158 County: USA</b>			Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: <b>Jane Borst</b> Tel Number: <b>515-281-4911</b>		
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">4</div><div style="border: 1px solid black; padding: 2px 5px;">2</div><div style="border: 1px solid black; padding: 2px 5px;">6</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">4</div><div style="border: 1px solid black; padding: 2px 5px;">5</div><div style="border: 1px solid black; padding: 2px 5px;">7</div><div style="border: 1px solid black; padding: 2px 5px;">1</div></div>			7. TYPE OF APPLICANT: (Enter appropriate letter in box) <b>A</b> A. State                      H. Independent School District B. County                  I. State Controlled Institution of Higher Learning C. Municipality           J. Private University D. Township              K. Indian Tribe E. Interstate              L. Individual F. Intermunicipality     M. Profit Organization G. Special District      N. Other (Specify)		
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision  If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):			9 NAME OF FEDERAL AGENCY: <b>Health Resources and Services Administration, Maternal and Child Health Bureau</b>		
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">3</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">4</div></div> TITLE: <b>Maternal and Child Health Services Block Grant</b>			11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: <b>Title V Block Grant</b>		
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): <b>state</b>					
13. PROPOSED PROJECT:			14. CONGRESSIONAL DISTRICTS OF:		
Start Date: <b>10/01/2005</b>		Ending Date: <b>09/30/2006</b>		a. Applicant <b>IA Dept of Public Health</b>	
				b. Project <b>Title V Block Grant</b>	
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?			
a. Federal	\$ <u>6,737,839.00</u>	a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE:  b. NO <input type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW			
b. Applicant	\$ <u>830,778.00</u>				
c. State	\$ <u>5,164,902.00</u>				
d. Local	\$ <u>0.00</u>				
e. Other	\$ <u>1,701,976.00</u>				
f. Program Income	\$ <u>320,000.00</u>				
g. TOTAL	\$ <u>14,755,495.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No			
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.					
a. Typed Name of Authorized Representative <b>Julie McMahon</b>			b. Title <b>Division Director</b>		c. Telephone Number <b>515-281-3104</b>
d. Signature of Authorized Representative					e. Date Signed

**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2006**

*[Secs. 504 (d) and 505(a)(3)(4)]*

**STATE: IA**

**1. FEDERAL ALLOCATION**

(Item 15a of the Application Face Sheet [SF 424])

Of the Federal Allocation (1 above), the amount earmarked for:

A.Preventive and primary care for children:

\$ 2,166,179 ( 32.15%)

B.Children with special health care needs:

\$ 2,420,591 ( 35.93%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 529,523 ( 7.86%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

\$ 6,737,839

**2. UNOBLIGATED BALANCE** (Item 15b of SF 424)

\$ 830,778

**3. STATE MCH FUNDS** (Item 15c of the SF 424)

\$ 5,164,902

**4. LOCAL MCH FUNDS** (Item 15d of SF 424)

\$ 0

**5. OTHER FUNDS** (Item 15e of SF 424)

\$ 1,701,976

**6. PROGRAM INCOME** (Item 15f of SF 424)

\$ 320,000

**7. TOTAL STATE MATCH** (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 5,035,775

\$ 7,186,878

**8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)**

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 14,755,495

**9. OTHER FEDERAL FUNDS**

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 0

d. Abstinence Education: \$ 318,198

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 0

h. AIDS: \$ 0

i. CDC: \$ 160,000

j. Education: \$ 165,913

k. Other: \$ 0

ECCS grant \$ 140,000

EHDI - MCHB \$ 129,805

Family Planning \$ 1,146,790

Medical Home \$ 277,777

**10. OTHER FEDERAL FUNDS** (SUBTOTAL of all Funds under item 9)

\$ 2,438,483

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 17,193,978

**FORM NOTES FOR FORM 2**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Main  
**Field Name:** UnobligatedBalance  
**Row Name:** Unobligated Balance  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Unobligated funds are distributed as follows:  
Maternal Health \$332,311  
Infant Health \$498,467
2. **Section Number:** Main  
**Field Name:** CDC  
**Row Name:** Other Federal Funds - CDC  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
CDC Newborn Hearing Screening Grant

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: IA**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 6,940,521	\$ 7,371,735	\$ 6,760,133	\$ 0	\$ 6,737,839	\$ 0
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 640,318	\$ 1,116,348	\$ 796,731	\$ 0	\$ 830,778	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 5,685,629	\$ 4,764,860	\$ 5,679,015	\$ 0	\$ 5,164,902	\$ 0
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 461,071	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 2,108,368	\$ 1,765,235	\$ 1,702,628	\$ 0	\$ 1,701,976	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 250,666	\$ 302,870	\$ 190,000	\$ 0	\$ 320,000	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 15,625,502	\$ 15,782,119	\$ 15,128,507	\$ 0	\$ 14,755,495	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 3,196,001	\$ 2,957,642	\$ 2,902,171	\$ 0	\$ 2,438,483	\$ 0
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 18,821,503	\$ 18,739,761	\$ 18,030,678	\$ 0	\$ 17,193,978	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: IA**

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 7,022,990	\$ 5,752,666	\$ 7,016,116	\$ 6,081,511	\$ 7,131,009	\$ 6,919,976
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 979,296	\$ 981,733	\$ 997,995	\$ 870,971	\$ 870,969	\$ 1,211,216
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 6,004,025	\$ 5,362,591	\$ 5,519,837	\$ 5,284,290	\$ 5,350,256	\$ 6,785,644
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 1,208,080	\$ 1,613,788	\$ 1,743,710	\$ 1,837,147	\$ 1,969,913	\$ 1,874,594
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 401,940	\$ 404,785	\$ 420,000	\$ 315,954	\$ 273,200	\$ 259,502
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 15,616,331	\$ 14,115,563	\$ 15,697,658	\$ 14,389,873	\$ 15,595,347	\$ 17,050,932
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 2,060,987	\$ 2,209,189	\$ 2,330,673	\$ 2,356,863	\$ 3,029,347	\$ 2,910,955
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 17,677,318	\$ 16,324,752	\$ 18,028,331	\$ 16,746,736	\$ 18,624,694	\$ 19,961,887
(STATE MCH BUDGET TOTAL)						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** UnobligatedBalanceExpended  
**Row Name:** Unobligated Balance  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
The Children with Special Health Care Needs - Child Health Specialty Clinics experienced significant reduction of state funds and Medicaid match funds in FFY2003. Services were maintained by shifting to federal Title V funds.
2. **Section Number:** Main  
**Field Name:** UnobligatedBalanceExpended  
**Row Name:** Unobligated Balance  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The increase in "Unobligated" funds expended in 2004 were actually 2003 funds spent in 2004.
3. **Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
As state funds decreased, local match was needed to meet requirements. This is the first year, Iowa claimed match provided through local maternal and child health agencies.
4. **Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
As state funds decreased, local match was needed to meet requirements. This is the second year, Iowa claimed match provided through local maternal and child health agencies.
5. **Section Number:** Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
As state funds decreased, local match was needed to meet requirements. This is the second year, Iowa claimed match provided through local maternal and child health agencies.
6. **Section Number:** Main  
**Field Name:** OtherFundsExpended  
**Row Name:** Other Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Due to a decrease in state appropriations less funds were available for claiming federal EPSDT funds.
7. **Section Number:** Main  
**Field Name:** ProgramIncomeExpended  
**Row Name:** Program Income  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The source of Program Income is CHSC direct services. Income from services was more than anticipated.
8. **Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
The other federal funds expended is an estimation of the actual funds spent.

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: IA**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 2,256,899	\$ 2,337,806	\$ 2,481,551	\$ 0	\$ 2,458,686	\$ 0
b. Infants < 1 year old	\$ 495,412	\$ 311,185	\$ 296,908	\$ 0	\$ 297,057	\$ 0
c. Children 1 to 22 years old	\$ 5,992,846	\$ 6,382,010	\$ 6,528,088	\$ 0	\$ 6,496,444	\$ 0
d. Children with Special Healthcare Needs	\$ 6,456,580	\$ 6,314,083	\$ 5,307,937	\$ 0	\$ 4,973,785	\$ 0
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 423,765	\$ 437,035	\$ 514,023	\$ 0	\$ 529,523	\$ 0
g. SUBTOTAL	\$ 15,625,502	\$ 15,782,119	\$ 15,128,507	\$ 0	\$ 14,755,495	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 317,512		\$ 317,512		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 50,000		\$ 50,000		\$ 0	
d. Abstinence Education	\$ 325,003		\$ 325,003		\$ 318,198	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 127,600		\$ 127,600		\$ 160,000	
j. Education	\$ 166,908		\$ 165,913		\$ 165,913	
k. Other						
ECCS grant	\$ 0		\$ 100,000		\$ 140,000	
EHDI - MCHB	\$ 0		\$ 0		\$ 129,805	
Family Planning	\$ 1,074,830		\$ 1,052,537		\$ 1,146,790	
Medical Home	\$ 128,703		\$ 137,606		\$ 277,777	
AWARe grant	\$ 0		\$ 100,000		\$ 0	
Healthy & Ready Work	\$ 300,000		\$ 300,000		\$ 0	
Newborn CSCHN	\$ 0		\$ 126,000		\$ 0	
AWARe - WH Grant	\$ 100,000		\$ 0		\$ 0	
ECCS Grant	\$ 100,000		\$ 0		\$ 0	
Genetics	\$ 299,445		\$ 0		\$ 0	
Newborn CSHCN	\$ 106,000		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 3,196,001		\$ 2,902,171		\$ 2,438,483	



**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: IA**

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 2,427,182	\$ 2,131,762	\$ 2,334,578	\$ 1,951,264	\$ 2,356,138	\$ 1,949,736
b. Infants < 1 year old	\$ 437,463	\$ 546,797	\$ 412,472	\$ 592,804	\$ 416,870	\$ 518,040
c. Children 1 to 22 years old	\$ 6,819,266	\$ 5,704,003	\$ 6,804,954	\$ 5,206,508	\$ 6,660,524	\$ 7,323,351
d. Children with Special Healthcare Needs	\$ 5,439,526	\$ 5,256,150	\$ 5,639,723	\$ 6,215,772	\$ 5,691,181	\$ 6,863,859
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 492,894	\$ 476,851	\$ 505,931	\$ 423,525	\$ 470,634	\$ 395,946
g. SUBTOTAL	\$ 15,616,331	\$ 14,115,563	\$ 15,697,658	\$ 14,389,873	\$ 15,595,347	\$ 17,050,932
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 188,793		\$ 300,000		\$ 300,000	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 122,500		\$ 75,000		\$ 100,000	
d. Abstinence Education	\$ 424,000		\$ 424,908		\$ 741,512	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 0		\$ 127,000		\$ 127,600	
j. Education	\$ 311,603		\$ 129,382		\$ 109,689	
k. Other						
Family Planning	\$ 707,300		\$ 684,637		\$ 1,026,644	
Genetics	\$ 0		\$ 297,861		\$ 295,199	
Medical Home/CSHCN	\$ 0		\$ 0		\$ 128,703	
Newborn Hearing /CSHCN	\$ 0		\$ 0		\$ 100,000	
IDHS-HCCI	\$ 50,000		\$ 91,885		\$ 0	
Newborn Hearing	\$ 0		\$ 100,000		\$ 0	
Genetics-MCHB	\$ 56,791		\$ 0		\$ 0	
Newborn Hearing-MCHB	\$ 100,000		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 2,060,987		\$ 2,330,673		\$ 3,029,347	

## FORM NOTES FOR FORM 4

None

### FIELD LEVEL NOTES

1. **Section Number:** I. Federal-State MCH Block Grant Partnership

**Field Name:** PregWomenExpended

**Row Name:** Pregnant Women

**Column Name:** Expended

**Year:** 2003

**Field Note:**

Budget projections included spending approximately \$348,000 of unobligated funds. Due to staff vacancies and increased discretionary grants, expenditures from Title V funds were less than budget.

2. **Section Number:** I. Federal-State MCH Block Grant Partnership

**Field Name:** Children\_0\_1Expended

**Row Name:** Infants <1 year old

**Column Name:** Expended

**Year:** 2003

**Field Note:**

Budget amounts for Infant Health were under projected. It appears that there was an increase in the number of infants served. In addition, the new data system, CARES, improved documentation of services delivered.

Iowa's number of infants served by Title V and Infant Health budget does not include the Newborn Metabolic Screening Program. This program is administered by the University of Iowa Hygienic lab. While state health agency's Center for Genetics provides oversight for surveillance and follow-up activities, neither budget nor expenses are reported by the Iowa Department of Public Health.

3. **Section Number:** I. Federal-State MCH Block Grant Partnership

**Field Name:** Children\_0\_1Expended

**Row Name:** Infants <1 year old

**Column Name:** Expended

**Year:** 2004

**Field Note:**

Funds originally budgeted for infant health were redirected to child health.

4. **Section Number:** I. Federal-State MCH Block Grant Partnership

**Field Name:** CSHCNExpended

**Row Name:** CSHCN

**Column Name:** Expended

**Year:** 2003

**Field Note:**

The Children with Special Health Care Needs program - Child Health Specialty Clinics has had a significant decrease in state funds and Medicaid match funds.

5. **Section Number:** I. Federal-State MCH Block Grant Partnership

**Field Name:** AdminExpended

**Row Name:** Administration

**Column Name:** Expended

**Year:** 2003

**Field Note:**

Restrictions in state level activities implemented in response to a state budget crisis resulted in decreased expenditures for program administrative activities.

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: IA**

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 3,881,685	\$ 4,378,692	\$ 3,504,392	\$ 0	\$ 3,971,482	\$ 0
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 5,397,823	\$ 4,852,008	\$ 4,978,786	\$ 0	\$ 4,145,766	\$ 0
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,600,033	\$ 1,497,528	\$ 1,612,141	\$ 0	\$ 1,731,221	\$ 0
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 4,745,961	\$ 5,053,891	\$ 5,033,188	\$ 0	\$ 4,907,026	\$ 0
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 15,625,502	\$ 15,782,119	\$ 15,128,507	\$ 0	\$ 14,755,495	\$ 0

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: IA**

TYPE OF SERVICE	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 8,862,531	\$ 7,264,229	\$ 7,750,978	\$ 6,893,489	\$ 3,923,386	\$ 4,286,895
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 1,836,194	\$ 2,983,666	\$ 3,105,775	\$ 3,679,900	\$ 5,412,772	\$ 7,135,520
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,006,024	\$ 1,020,876	\$ 861,310	\$ 874,960	\$ 1,441,079	\$ 1,395,963
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 3,911,582	\$ 2,846,792	\$ 3,979,595	\$ 2,941,525	\$ 4,818,110	\$ 4,232,554
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 15,616,331	\$ 14,115,563	\$ 15,697,658	\$ 14,389,874	\$ 15,595,347	\$ 17,050,932

## FORM NOTES FOR FORM 5

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
State funds budgeted for Child Health Specialty Clinic were not available due to state cuts. Direct care funds were claimed as match.
2. **Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
The Children with Special Health Care Needs program - Child Health Specialty Clinics had significant reduction of state funds and Medicaid match.
3. **Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
State funds budgeted for Child Health Specialty Clinic were not available due to state cuts. Enabling Services funds were claimed as match.
4. **Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Due to staff vacancies and increased discretionary grants expenditures from Tittle V funds were less than budget.

FORM 6						
NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED						
Sect. 506(a)(2)(B)(iii)						
STATE: IA						
Total Births by Occurrence: 38,526				Reporting Year: 2004		
Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	38,233	99.2	41	4	4	100
Congenital Hypothyroidism	38,233	99.2	13	18	18	100
Galactosemia	38,233	99.2	14	3	3	100
Sickle Cell Disease	38,233	99.2	11	11	11	100
Other Screening (Specify)						
Biotinidase Deficiency	38,233	99.2	23	4	4	100
Congenital Adrenal Hyperplasia (CAH)	38,233	99.2	6	3	3	100
Screening Programs for Older Children & Women (Specify Tests by name)						
(1) Use occurrent births as denominator.						
(2) Report only those from resident births.						
(3) Use number of confirmed cases as denominator.						

## FORM NOTES FOR FORM 6

Disorders identified by the Iowa Neonatal Metabolic Screening Program are:  
Phenylketonuria (PKU)  
Galactosemia  
Congenital Hypothyroidism  
Congenital Adrenal Hyperplasia (CAH)  
Medium chain acyl-CoA dehydrogenase Deficiency (MCADD)  
Sickle Cell Anemia  
Hemoglobin S, C, E  
Biotinidase Deficiency  
Expanded Screening using Tandem Mass Spectrometry (MS/MS)

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** SickleCellDisease\_OneScreenNo  
**Row Name:** SickleCellDisease  
**Column Name:** Receiving at least one screen  
**Year:** 2006  
**Field Note:**  
Sickle Cell Disease:  
Disease - # of confirmed cases / needing treatment / percentage  
Hemoglobin E - 1/1/100%  
Hemoglobin E/Barts - 2/2/100%  
Hemoglobin S/C - 1/1/100%  
Sickle Cell Anemia - 5/5/100%  
Sickle Cell /B - Thalassemia - 1/1/100%
2. **Section Number:** Main  
**Field Name:** Galactosemia\_Presumptive  
**Row Name:** Galactosemia  
**Column Name:** Presumptive positive screens  
**Year:** 2006  
**Field Note:**  
Galactosemia  
Presumed positive screens/confirmed cases  
Borderline Galactosemia= 21 confirmed = 17 Duarte Galactosemic  
21/17/17/ 100%
3. **Section Number:** Main  
**Field Name:** SickleCellDisease\_Presumptive  
**Row Name:** SickleCellDisease  
**Column Name:** Presumptive positive screens  
**Year:** 2006  
**Field Note:**  
There were 11 presumptive positive screens and 11 confirmed cases for Sickle Cell Disease.
4. **Section Number:** Main  
**Field Name:** Congenital\_Confirmed  
**Row Name:** Congenital  
**Column Name:** Confirmed Cases  
**Year:** 2006  
**Field Note:**  
Five of the 18 were initially reported as borderline and later confirmed as cases needing treatment.
5. **Section Number:** Main  
**Field Name:** SickleCellDisease\_Confirmed  
**Row Name:** SickleCellDisease  
**Column Name:** Confirmed Cases  
**Year:** 2006  
**Field Note:**  
There were 11 presumptive positive screens and 11 confirmed cases for Sickle Cell Disease.
6. **Section Number:** Other Screening Types  
**Field Name:** Other  
**Row Name:** All Rows  
**Column Name:** All Columns  
**Year:** 2006  
**Field Note:**  
Expanded Tandem Mass Spectrometry (MS/MS)  
Biotinidase Deficiency  
Disease - # of confirmed cases / needing treatment / received treatment/ percentage  
  
MCADD - 13/4/4/ 100%  
VLCAD - 7/0/0/ 0%  
3- MCC - 10/1/1/ 100%

**FORM 7**  
**NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V**  
**(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)**

[Sec. 506(a)(2)(A)(i-ii)]

**STATE: IA**

**Reporting Year: 2004**

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	9,871	63.0	0.2	22.0	12.0	3.0
Infants < 1 year old	20,752	90.7	0.0	2.1	7.2	0.0
Children 1 to 22 years old	110,840	86.9	0.2	2.9	10.0	0.0
Children with Special Healthcare Needs	4,474	34.0	0.0	48.0	3.0	15.0
Others	0	0.0	0.0	0.0	0.0	0.0
<b>TOTAL</b>	<b>145,937</b>					



## FORM NOTES FOR FORM 7

None

### FIELD LEVEL NOTES

- 1. Section Number:** Main  
**Field Name:** PregWomen\_TS  
**Row Name:** Pregnant Women  
**Column Name:** Title V Total Served  
**Year:** 2006  
**Field Note:**  
The decrease in the number of pregnant women served by Title V is due to the decreases in state funds. Data were obtained from the Women's Health Information System (WHIS).
- 2. Section Number:** Main  
**Field Name:** PregWomen\_XIX  
**Row Name:** Pregnant Women  
**Column Name:** Title XIX %  
**Year:** 2006  
**Field Note:**
- 3. Section Number:** Main  
**Field Name:** Children\_0\_1\_TS  
**Row Name:** Infants <1 year of age  
**Column Name:** Title V Total Served  
**Year:** 2006  
**Field Note:**  
Data were obtained from the Child and Adolescent Reporting System (CAREs). The number of infants served by Title V DOES NOT include an accounting of newborns receiving metabolic screening services. Title V funds do not subsidize this program in Iowa. Third party payors support newborn metabolic screening.
- 4. Section Number:** Main  
**Field Name:** Children\_1\_22\_TS  
**Row Name:** Children 1 to 22 years of age  
**Column Name:** Title V Total Served  
**Year:** 2006  
**Field Note:**  
Data were obtained from the Child and Adolescent Reporting System (CAREs). The number of infants served by Title V DOES NOT include an accounting of newborns receiving metabolic screening services. Title V funds do not subsidize this program in Iowa. Third party payors support newborn metabolic screening.
- 5. Section Number:** Main  
**Field Name:** CSHCN\_TS  
**Row Name:** Children with Special Health Care Needs  
**Column Name:** Title V Total Served  
**Year:** 2006  
**Field Note:**  
The "total served" is a lower quantity than in past years because individuals receiving care coordination services without an accompanying direct care service are not counted. The current program database does not count care coordination services and estimates are not felt to be valid. Program leadership will discuss how best to document the occurrence of care coordination services. The decrease in the number of children and youth with a special health care need served by Title V is due to the decrease in state funds.
- 6. Section Number:** Main  
**Field Name:** CSHCN\_XXI  
**Row Name:** Children with Special Health Care Needs  
**Column Name:** Title XXI %  
**Year:** 2006  
**Field Note:**  
Children on Iowa's Title XXI Program are only known to CHSC by the insurance company which contracts with the Dept. of Human Services to serve Title XXI enrollees. Therefore, SCHIP status is not known.
- 7. Section Number:** Main  
**Field Name:** CSHCN\_Unknown  
**Row Name:** Children with Special Health Care Needs  
**Column Name:** Unknown %  
**Year:** 2006  
**Field Note:**  
The percentage with "unknown insurance status" is higher in this year's report because in past years, unknowns were mistakenly classified and counted as "other". This classification error has now been corrected.
- 8. Section Number:** Main  
**Field Name:** AllOthers\_TS  
**Row Name:** Others  
**Column Name:** Title V Total Served  
**Year:** 2006  
**Field Note:**  
No other population groups are served by Title V.

**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE**  
**XIX**  
**(BY RACE AND ETHNICITY)**  
[SEC. 506(A)(2)(C-D)]  
**STATE: IA**

Reporting Year: 2004

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	37,701	34,841	1,440	239	971	7	0	203
Title V Served	9,871	8,018	638	111	136	22	0	946
Eligible for Title XIX	8,843	7,989	478	124	147	5	0	100
<b>INFANTS</b>								
Total Infants in State	38,369	35,476	1,464	239	977	7	0	206
Title V Served	20,752	8,476	607	42	153	34	365	11,075
Eligible for Title XIX	8,843	7,989	478	124	147	5	0	100

**II. UNDUPLICATED COUNT BY ETHNICITY**

				<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	34,770	2,805	112	0	0	0	0	0
Title V Served	9,871	1,938	57	1,494	2	10	119	307
Eligible for Title XIX	7,521	1,322	0	1,057	1	24	174	66
<b>INFANTS</b>								
Total Infants in State	35,410	2,832	113	0	0	0	0	0
Title V Served	8,985	2,048	9,719	146	0	2	11	1,889
Eligible for Title XIX	7,521	1,322	0	1,057	1	24	174	66

## FORM NOTES FOR FORM 8

The total number of deliveries served by Title V were obtained from the Women's Health Information System (WHIS).  
The total number infants served by Title V were obtained from the Child and Adolescent Reporting System (CAREs).  
The total numbers of deliveries and infants were obtained from the 2004 Vital Statistics provisional data.  
Eligible for Medicaid numbers were taken from 2004 Medicaid data.

### FIELD LEVEL NOTES

- 1. Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTotal\_All  
**Row Name:** Total Infants in State  
**Column Name:** Total All Races  
**Year:** 2006  
**Field Note:**  
The number of infants served by Title V does not include an accounting of newborns receiving metabolic screening services. Title V funds do not subsidize this program in Iowa. Third party payors support newborn metabolic screening.
- 2. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_TotalHispanic  
**Row Name:** Total Deliveries in State  
**Column Name:** Total Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
The 2004 Vital Statistics does not report the sub-categories for county or area of origin for Hispanic or Latino.
- 3. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleV\_TotalHispanic  
**Row Name:** Title V Served  
**Column Name:** Total Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
The Women's Health Information System (WHIS) allows clients to report multiple ethnicity categories.
- 4. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleXIX\_TotalHispanic  
**Row Name:** Eligible for Title XIX  
**Column Name:** Total Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
2004 Medicaid breakouts of Hispanic or Latino ethnicity into subcategories were not available.
- 5. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTotal\_TotalHispanic  
**Row Name:** Total Infants in State  
**Column Name:** Total Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
The 2004 Vital Statistics data does not report the sub-categories for county or area of origin for Hispanic or Latino.
- 6. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTitleV\_TotalNotHispanic  
**Row Name:** Title V Served  
**Column Name:** Total Not Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
Data obtained from the Child and Adolescent Reporting System (CAREs).
- 7. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTitleV\_TotalHispanic  
**Row Name:** Title V Served  
**Column Name:** Total Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
Data obtained from the Child and Adolescent Reporting System (CAREs).
- 8. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTitleV\_NotReported  
**Row Name:** Title V Served  
**Column Name:** Ethnicity Not Reported  
**Year:** 2006  
**Field Note:**  
Data obtained from the Child and Adolescent Reporting System (CAREs).
- 9. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTitleV\_Mexican  
**Row Name:** Title V Served  
**Column Name:** Mexican  
**Year:** 2006  
**Field Note:**  
Data obtained from the Child and Adolescent Reporting System (CAREs).
- 10. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTitleV\_Cuban  
**Row Name:** Title V Served  
**Column Name:** Cuban  
**Year:** 2006  
**Field Note:**  
Data obtained from the Child and Adolescent Reporting System (CAREs).
- 11. Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTitleV\_PuertoRican  
**Row Name:** Title V Served  
**Column Name:** Puerto Rican  
**Year:** 2006  
**Field Note:**

Data obtained from the Child and Adolescent Reporting System (CAREs).

**12. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_CentralAmerican

**Row Name:** Title V Served

**Column Name:** Central and South American

**Year:** 2006

**Field Note:**

Data obtained from the Child and Adolescent Reporting System (CAREs).

**13. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_EthnicityOther

**Row Name:** Title V Served

**Column Name:** Other and Unknown

**Year:** 2006

**Field Note:**

Data obtained from the Child and Adolescent Reporting System (CAREs).

**14. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleXIX\_TotalHispanic

**Row Name:** Eligible for Title XIX

**Column Name:** Total Hispanic or Latino

**Year:** 2006

**Field Note:**

2004 Medicaid data breakouts of Hispanic or Latino ethnicity into subcategories were not available.

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: IA**

	<b>FY 2006</b>	<b>FY 2005</b>	<b>FY 2004</b>	<b>FY 2003</b>	<b>FY 2002</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800) 369- 2229</u>	<u>(800) 369-2229</u>	<u>(800) 369-2229</u>	<u>(800) 369-2229</u>	<u>(800) 369-2229</u>
2. State MCH Toll-Free "Hotline" Name	Iowa Healthy Families Line	Iowa Healthy Families Line	Iowa Healthy Families Line	Iowa Healthy Families Line	Iowa Healthy Families Line
3. Name of Contact Person for State MCH "Hotline"	<u>Margaret VanGinkel</u>	<u>Margaret VanGinkel</u>	<u>Margaret VanGinkel</u>	<u>Margaret VanGinkel</u>	<u>Margaret VanGinkel</u>
4. Contact Person's Telephone Number	<u>(515) 331-8900</u>	<u>(515) 331-8900</u>	<u>(515) 331-8900</u>	<u>(515) 331-8900</u>	<u>(515) 331-8900</u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u></u>	<u>6,035</u>	<u>4,722</u>	<u>4,173</u>

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: IA**

	<b>FY 2006</b>	<b>FY 2005</b>	<b>FY 2004</b>	<b>FY 2003</b>	<b>FY 2002</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
4. Contact Person's Telephone Number	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

<b>FORM NOTES FOR FORM 9</b>
None
<b>FIELD LEVEL NOTES</b>
None

**FORM 10**  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2006**  
*[SEC. 506(A)(1)]*  
**STATE: IA**

1. State MCH Administration:  
(max 2500 characters)

The Iowa Title V Maternal and Child Health Services Block Grant Program is administered by the Bureau of Family Health, Division of Health Promotion and Chronic Disease Prevention, Iowa Department of Public Health. The Bureau's responsibilities include: 1) conducting a statewide needs assessment; 2) developing policies, plans, and programs to improve the health of women, infants, children, adolescents and families; and 3) administering Family Planning programs. The Bureau is administratively responsible for coordinating Title V services for CYSHCN through a contract with the University of Iowa Department of Pediatrics, Child Health Specialty Clinics (CHSC).

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 6,737,839
3. Unobligated balance (Line 2, Form 2)	\$ 830,778
4. State Funds (Line 3, Form 2)	\$ 5,164,902
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 1,701,976
7. Program Income (Line 6, Form 2)	\$ 320,000
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ 14,755,495</b>

9. Most significant providers receiving MCH funds:

<u>Local contract Maternal and Child Health Agencies</u>
<u>Regional Child Health Specialty Clinics</u>
<u>University of Iowa, University of Northern Iowa,</u>
<u>Iowa State University</u>

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	9,871
b. Infants < 1 year old	20,752
c. Children 1 to 22 years old	110,840
d. CSHCN	4,474
e. Others	0

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:  
(max 2500 characters)

Child Health - Twenty-five local child health agencies provide education on preventive well child services to all families newly enrolled in Title XIX and ongoing care coordination for families not already served by managed care. Local agencies reach vulnerable populations and provide services regardless of funding source. In medically underserved areas of the state, agencies provide well child screening and preventive health services. Services are supported through collaborative efforts between the Dept of Human Services (DHS) (Iowa's Medicaid agency) and state and local Title V program partnerships. Child health agencies provided care to more than 131,592 children in FFY04. Maternal Health - Local maternal health agencies across the state served 9,871 low-income pregnant women. The agencies are essential to increasing the number of women receiving prenatal care and promoting early entry into care. Wide ranges of health education and support services are available to low-income pregnant women. The agencies play a critical role in providing access to care. CYSHCN - CHSC Birth to Five Program services are located in each of CHSC's regional centers. The Birth to Five Program provides developmental screening, assessment, and follow-up for young children who are at-risk for developmental delay. Recommendations and family support are provided, as is care coordination, if needed. Advanced registered nurse practitioners with extensive expertise in the care and management of young children with special health care needs are the providers.

b. Population-Based Services:  
(max 2500 characters)

Newborn Hearing Screening Initiative – The Title V Block Grant helps Iowa establish a leadership role for the development and implementation of the newborn hearing screening program by establishing a quality system for Early Hearing Detection and Intervention in Iowa. Iowa secured two additional grants related to newborn hearing - one from CDC to support implementation of the newborn hearing screening surveillance and monitoring system (eSP); and one from HRSA to improve the follow-up services component of the overall early detection and intervention program. Healthy Child Mental Development (ABCD II project) - In November 2003, the National Academy for State Health Policy (NASHP) approved the Iowa Department of Human Services' grant application for the Assuring Better Child Health and Development (ABCD II) initiative. Funded by the Commonwealth Foundation, this grant project is aimed at identifying and implementing policy and system changes to support the provision of preventive care to children 0 to 3 years by Medicaid providers. The project will identify models, test a standardized set of healthy mental development services, and identify financing mechanisms for Medicaid-eligible children 0 to 3 that can be applied statewide and tailored for individual communities. The project will build upon our existing state infrastructure and capitalize on recent efforts to create public-private health provider partnerships.

c. Infrastructure Building Services:  
(max 2500 characters)

Databases for women's health (Women's Health Information System – "WHIS") and child health (Child and Adolescent Reporting System or "CAREs") generate electronic health records that provide critical information for informed decision-making. Local agencies collect information used to monitor needs. Statewide and community level data reports assist communities to assess local assets, needs, and services. The data systems are in their third year of operation. Iowa's MCH and CYSHCN Title V Programs provide leadership for capacity-building and program development. The Bureau of Family Health and Child Health Specialty Clinics work together to convene partner agencies and design creative responses to emerging issues. Examples of new program and resource development include: 1) the Iowa Covering Kids and Families initiative (funded in part by the Robert Wood Johnson Foundation); 2) the telehealth infrastructure project to improve access for Children's Mental Health (funded primarily by the Magellan Behavioral Health Corp.); 3) the Iowa Early Childhood Comprehensive Systems (ECCS) project (funded by MCHB); 4) the Early Hearing Detection and Intervention projects (funded by CDC and HRSA); 5) the Iowa Medical Home Initiative (funded by MCHB with a major contribution by Early ACCESS (IDEA, Part C); and 6) the Assuring Better Child Health and Development project (funded by the Commonwealth Fund).

## 12. The primary Title V Program contact person:

Name	Jane Borst
Title	Bureau Chief
Address	321 East 12th Street
City	Des Moines
State	IA
Zip	50319
Phone	(515) 281-4911
Fax	(515) 242-6384
Email	jborst@idph.state.ia.us
Web	www.idph.state.ia.us

## 13. The children with special health care needs (CSHCN) contact person:

Name	Jeffrey Lobas
Title	Director - Child Health Specialty Clinics
Address	100 Hawkins Drive, Rm 247 CDD
City	Iowa City
State	IA
Zip	52242
Phone	(319) 356-1118
Fax	(319) 356-3715
Email	jeffrey-lobas@uiowa.edu
Web	www.uihealthcare.com/chsc



**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None

**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: IA**

**PERFORMANCE MEASURE # 01**

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	99.2	99.5	99.5	99.5	99.7
Annual Indicator	100.0	99.1	99.4	100.0	100.0
Numerator	38,170	37,412	37,598	47	43
Denominator	38,170	37,756	37,815	47	43
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	99.8	99.9	99.9	99.9	99.9
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 02**

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective			40	59.2	59.9
Annual Indicator			58.6	58.6	58.6
Numerator			225	225	225
Denominator			384	384	384
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	60.6	61.3	62	65.1	68.4
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 03**

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

Annual Objective and Performance Data					
	2000	2001	2002	2003	2004
Annual Performance Objective			50	58.2	59.4
Annual Indicator			57.1	57.1	57.1
Numerator			413	413	413
Denominator			723	723	723
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	60.6	61.8	63	66.2	69.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 04**

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

Annual Objective and Performance Data					
	2000	2001	2002	2003	2004
Annual Performance Objective			93	63.9	63.3
Annual Indicator			64.5	64.5	64.5
Numerator			468	468	468
Denominator			726	726	726
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	67.7	71.1	74.7	78.4	82.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 05**

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective			67	79.4	81
Annual Indicator			77.8	77.8	77.8
Numerator			301	301	301
Denominator			387	387	387
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	82.6	84.3	86	87.7	89.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transition to all aspects of adult life. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective			10		
Annual Indicator			5.8	5.8	5.8
Numerator			310	310	310
Denominator			5,351	5,351	5,351
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	6.4	7	7.7	8.5	9.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 07**

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	85	90	90	91	91
Annual Indicator	84.4	86.0	89.0	91.4	93.6
Numerator	17,446	15,173	6,786	6,222	5,968
Denominator	20,663	17,635	7,625	6,805	6,374
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	94	94	94	95	95
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 08**

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	21.7	21.6	16.4	16	15
Annual Indicator	17.2	16.4	15.7	14.9	14.8
Numerator	1,136	1,049	1,006	912	895
Denominator	66,000	64,011	64,011	61,361	60,369
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	14.7	14.7	14.6	14.5	14.5
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	50	40	41	42	43
Annual Indicator	41.4	42.3	39.4	40.0	43.4
Numerator	14,829	14,891	13,259	12,513	14,577
Denominator	35,818	35,204	33,653	31,283	33,588
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	44	45	46	47	48
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 10**

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	5.8	5.7	3.5	3.4	3.4
Annual Indicator	3.5	3.4	4.1	4.5	6.7
Numerator	19	19	23	26	38
Denominator	550,000	564,225	564,224	572,000	569,387
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	5	5	4.8	4.8	4.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 11**

Percentage of mothers who breastfeed their infants at hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	59.7	60	61	61	64
Annual Indicator	63.1	60.2	65.0	65.9	67.0
Numerator	24,085	22,528	24,396	25,124	25,681
Denominator	38,170	37,443	37,558	38,139	38,309
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	68	68	68	69	69
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	75	85	86	88	97
Annual Indicator	62.8	89.5	81.4	93.2	98.9
Numerator	23,982	33,633	30,728	16,682	15,716
Denominator	38,170	37,579	37,749	17,899	15,892
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	99	99	99	99	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	6	6	5	4	3
Annual Indicator	6.1	6.2	4.7	8.6	6.0
Numerator	45,000	46,000	34,000	60,028	40,826
Denominator	736,000	747,000	723,000	698,000	680,437
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	5	4	3	3	3
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 14**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	85	90	92	94	98
Annual Indicator	89.8	94.7	97.1	98.7	99.7
Numerator	155,127	173,131	180,433	195,915	214,351
Denominator	172,815	182,821	185,888	198,485	214,993
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	99.8	99.8	99.8	99.8	99.9
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					



**PERFORMANCE MEASURE # 15**

The percent of very low birth weight infants among all live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	1.4	1.4	1.4	1.3	1.2
Annual Indicator	1.3	1.2	1.2	1.2	1.3
Numerator	491	437	444	443	507
Denominator	38,170	37,597	37,749	38,139	38,369
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	1.2	1.2	1.2	1.1	1.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	13.8	13.9	13.8	13.7	11
Annual Indicator	10.6	14.1	7.9	8.9	10.4
Numerator	24	32	18	19	22
Denominator	226,000	226,420	226,420	214,000	211,983
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	10	10	9.8	9.6	9.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 17**

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	80.5	63	65	70	80
Annual Indicator	64.0	67.0	64.0	87.6	95.3
Numerator	288	254	260	352	427
Denominator	450	379	406	402	448
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	96	96	96	97	97
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 18**

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	86.5	86.8	87	88	88.5
Annual Indicator	87.1	87.9	88.1	88.6	88.7
Numerator	33,251	33,064	33,244	33,809	34,021
Denominator	38,170	37,597	37,749	38,139	38,369
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	88.6	88.7	88.8	89	89
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 3**

Percent of children served by Title V, excluding CSHCN, who report a medical home.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	50	70	75	55	60
Annual Indicator	46.0	38.8	44.6	54.9	61.1
Numerator	7,820	9,715	46,703	64,165	80,535
Denominator	17,000	25,067	104,632	116,807	131,787
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	70	80	85	85	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 4**

Percent of low income children ages 1-4, enrolled in child health centers who have completed a referral to a dentist.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	20	21	22	23	6
Annual Indicator	9.0	3.0	1.5	4.5	0.9
Numerator	605	518	488	1,571	354
Denominator	6,725	17,430	31,553	35,033	39,063
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	5	5	6	6	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 8**

The degree to which key data are collected, managed, analyzed, and utilized for strategic assessment of the determinants and consequences of the health status of women, children, and families.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	40	44	64	67	70
Annual Indicator		61	66	70	72
Numerator		61	66	70	72
Denominator	96	96	96	96	96
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	73	74	75	76	
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**STATE PERFORMANCE MEASURE # 11**

Percent of counties that report screenings and referrals for behavioral problems in young children (ages 3-5).

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	9	10	65	68	69
Annual Indicator	56.6	63.6	63.6	55.4	53.5
Numerator	56	63	63	51	53
Denominator	99	99	99	92	99
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	70	70	70	72	
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**STATE PERFORMANCE MEASURE # 13**

Percent of infants determined to be at-risk receiving monitoring and follow-up services at age 12 months.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	0	10	25	50	55
Annual Indicator	4.4	5.3	6.9	7.4	9.2
Numerator	195	240	310	323	420
Denominator	4,480	4,561	4,479	4,360	4,579
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	60.5	66.5	73.1		
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 14**

Ratio of black-to-white preterm births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	2.1	1.8	1.5	1.2	1.0
Annual Indicator	2.4	2.3	1.1	1.4	1.6
Numerator	104.4	138.1	105	126	107
Denominator	44.1	61.1	95.1	92	68
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	1.0	1	1	1	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 15**

Percent of WIC clients, ages 2-5 years, that are overweight at or above the 95th percentile as defined by PedNSS.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	8.1	8.1	8.0	7.9	9
Annual Indicator	9.5	10.5	10.1	10.3	11.0
Numerator	3,850	4,209	4,387	4,546	4,992
Denominator	40,536	40,086	43,595	44,137	45,382
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	9	8.8	8.6	8.6	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 16**

Percent of families of 1 year old children enrolled in WIC who have participated in parenting education.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	15	20	20	15	17
Annual Indicator	15.0	15.2	14.2	14.8	14.4
Numerator	9,180	477	125	1,080	1,261
Denominator	61,197	3,142	880	7,300	8,740
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	20	22	24	26	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

## FORM NOTES FOR FORM 11

A proxy value is used for State Performance Measure #4The FFY04. Because the total number of children enrolled in Title V is not limited to those that are eligible to use Title V funds for dental care, this objective is difficult to measure accurately. This was taken into consideration when revising the SPM #4 target in FFY04.

### FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1  
**Field Name:** PM01  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
FFY02 data were obtained from the Neonatal Metabolic Screening Program.
2. **Section Number:** Performance Measure #1  
**Field Name:** PM01  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
FFY02 data were obtained from the Neonatal Metabolic Screening Program. Total births is by occurrence.
3. **Section Number:** Performance Measure #1  
**Field Name:** PM01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
FFY04 data were obtained from the Neonatal Metabolic Screening Program.
4. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.
5. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
6. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
7. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.
8. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
9. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
10. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS. The projected target objectives decrease for two years based on assumptions of continuing state financial difficulties and consequent limitation of Medicaid benefits. Patient migration from Medicaid managed care to traditional Medicaid may help alleviate problems with inadequate coverage.
11. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.

12. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
13. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.
14. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
15. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
16. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Because only one of the States (Maine) met the NCHS standards for reliability for PM 6, the 2002 indicator is the national average except for Maine which has its State value noted.
- Child Health Specialty Clinics is the recipient of an MCHB grant, "Adolescent Transitions: Health & Ready to Work." The project is developing a transition model in Black Hawk County for adolescents with special health care needs. Accessing health care and finding and maintaining employment are cornerstones of the model. Establishing medical homes for transitioning adolescents is also an important project goal. Selected specific activities are noted in Figure 4a. Unfortunately, the population-based "2000 Iowa Child & Family Household Health Survey" did not include survey items specifically inquiring about transition needs and plans of adolescents with special health care needs. If the survey is repeated, such items could be added.
17. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
18. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
19. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data were obtained from the Clinic Assessment Software Application.
20. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Immunization data are collected from January 2003 to December 2003 from public sector data.
21. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Immunization data are collected from January 2004 to December 2004 from public sector data.
22. **Section Number:** Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional data
23. **Section Number:** Performance Measure #8



**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional data

**24. Section Number:** Performance Measure #8

**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.

**25. Section Number:** Performance Measure #9

**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
For the fifth consecutive year, the Iowa Department of Public Health completed a survey to determine the prevalence of dental sealants on permanent molars of third-grade children in Iowa.

**26. Section Number:** Performance Measure #9

**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
For the sixth consecutive year, the Iowa Department of Public Health completed a survey to determine the prevalence of dental sealants on permanent molars of third-grade children in Iowa.

**27. Section Number:** Performance Measure #9

**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
For the seventh consecutive year, the Iowa Department of Public Health completed a survey to determine the prevalence of dental sealants on permanent molars of third-grade children in Iowa. See attachment in the State Narrative for survey methodology.

**28. Section Number:** Performance Measure #10

**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data

**29. Section Number:** Performance Measure #10

**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional data

**30. Section Number:** Performance Measure #10

**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.

**31. Section Number:** Performance Measure #11

**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 breastfeeding rates were obtained from the Iowa Metabolic Screening Profile.

**32. Section Number:** Performance Measure #11

**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The 2003 breastfeeding rates were obtained from the Iowa Metabolic Screening Profile.

**33. Section Number:** Performance Measure #11

**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The 2004 breastfeeding rates were obtained from the Iowa Metabolic Screening Profile.

**34. Section Number:** Performance Measure #12

**Field Name:** PM12  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**

IDPH conducts a survey with OB Hospitals requesting aggregate newborn hearing screening data. Sixty- nine hospitals surveyed responded, indicating 22,922 newborns, representing 85% of the total births, were screened for hearing loss prior to discharge. On January 1, 2004, all OB Hospitals have a mandatory requirement to report newborn hearing screening numbers to IDPH. IDPH is in the process of selecting a new database for newborn hearing screening. This will improve the accuracy for reporting.

**35. Section Number:** Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

IDPH conducted a survey with OB Hospitals requesting aggregate newborn hearing screening data. Forty-nine of the 89 hospitals responded. The 48 hospitals had 17,837 total births. Of the 17,837 births, 16,642 were screened. This indicates a screening rate of 93 percent. On January 1, 2004, all OB Hospitals have a mandatory requirement to report newborn hearing screening numbers to IDPH. IDPH selected eScreenPlus (eSP) as the software for web-based Early Hearing Detection and Intervention surveillance. Hospitals and audiologists will be able to use eSP to manage their screening programs and to report data to the State. eSP makes an integrated hearing record available to public health and medical professionals simultaneously.

**36. Section Number:** Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Mandatory universal screening was implemented January 1, 2004. Provisional data are reported from the newly implemented eSP data base which is currently being implemented. Forty-one percent (41%) of the initial screens have been entered into the system. The data include complete reporting from all 3 Level III Perinatal Centers; 3 out of 7 Level II Regional Centers; 4 of 12 Level II Centers, and 4 of 67 Level I Centers. Accordingly, hospitals serving high risk infants are over represented in the sample for the provisional data and Level I centers are under represented.

**37. Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

FFY2002 data were obtained from the current population survey from the U.S. Census Bureau.

**38. Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

FFY2003 data were obtained from the current population survey from the U.S. Census Bureau.

**39. Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

As of early July 2005, data from the Current Population Survey for 2004 was not available. The number provided is a three year average uninsured rate. hawk-i and Medicaid enrollment is at an all time high with outreach activities through hawk-i outreach and Covering Kids and Families demonstrating success for enrolling children. We recognize this population still needs to be reached and continue to identify strategies to decrease uninsured rates.

**40. Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

Data were obtained from the Annual EPSDT Report from the Medicaid HICFA 416 report.

**41. Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Data were obtained from the Annual EPSDT Report from the Medicaid CMS 416 report.

**42. Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Data were obtained from the 2004 Annual EPSDT Report from the Medicaid CMS 416 report.

**43. Section Number:** Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

Vital Statistics 2002 Provisional Data

**44. Section Number:** Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Vital Statistics 2003 Provisional data

**45. Section Number:** Performance Measure #15

**Field Name:** PM15

**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.

46. **Section Number:** Performance Measure #16  
**Field Name:** PM16  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data

47. **Section Number:** Performance Measure #16  
**Field Name:** PM16  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional data

48. **Section Number:** Performance Measure #16  
**Field Name:** PM16  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.

49. **Section Number:** Performance Measure #17  
**Field Name:** PM17  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data

50. **Section Number:** Performance Measure #17  
**Field Name:** PM17  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 data. The increase in percentage is due to the increase in the number of hospitals being classified as Regional 2 level hospitals.

51. **Section Number:** Performance Measure #17  
**Field Name:** PM17  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 data. The change in percentage is due to increases in the number of hospitals being classified as Regional 2 level hospitals.

52. **Section Number:** Performance Measure #18  
**Field Name:** PM18  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data

53. **Section Number:** Performance Measure #18  
**Field Name:** PM18  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional data

54. **Section Number:** Performance Measure #18  
**Field Name:** PM18  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.

55. **Section Number:** State Performance Measure #3  
**Field Name:** SM3  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data were obtained from the Child and Adolescent Reporting System (CAReS) year end report. The data are based on clients who reported a usual source of medical care that was available 24 hours a day, seven days a week, and maintains the client's record.

FFY02 data were obtained from the annual CAReS medical home report covering the entire fiscal year. FFY01 data were obtained from a proxy value from the second quarter medical home report covering January - March 2001.

56. **Section Number:** State Performance Measure #3  
**Field Name:** SM3  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**

Data were obtained from the Child and Adolescent Reporting System (CAREs) year end report. The data are based on clients who reported a usual source of medical care that was available 24 hours a day, seven days a week, and maintains the client's record.

FFY03 data were obtained from the annual CAREs medical home report covering the entire fiscal year.

**57. Section Number:** State Performance Measure #3

**Field Name:** SM3

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Data were obtained from the Child and Adolescent Reporting System (CAREs) year end report. The data are based on clients who reported a usual source of medical care that was available 24 hours a day, seven days a week, and maintains the client's record.

FFY04 data were obtained from the annual CAREs medical home report covering the entire fiscal year.

**58. Section Number:** State Performance Measure #4

**Field Name:** SM4

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

A proxy value was obtained from the local child health contract agencies' quarterly reports to the Oral Health Bureau.

**59. Section Number:** State Performance Measure #4

**Field Name:** SM4

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Data were obtained from the Child and Adolescent Reporting System (CAREs) 2003 year end report.

**60. Section Number:** State Performance Measure #4

**Field Name:** SM4

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

A proxy value was used to measure SPM #4. The numerator is based on the number of children ages 1-4 using Title V dental funding for dental care as determined through quarterly dental reports. The denominator is the total number of children ages 1-4 enrolled in Title V as determined through the Child and Adolescent Reporting System (CAREs).

Because the total number of children enrolled in Title V is not limited to those eligible to use Title V funds for dental care, this objective is difficult to measure accurately. This difficulty was taken into consideration as the target was revised in FFY04.

**61. Section Number:** State Performance Measure #8

**Field Name:** SM8

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

The data were obtained from a checklist of components that documents data system development. The checklist indicates the degree to which Iowa's Title V data systems have been developed.

**62. Section Number:** State Performance Measure #8

**Field Name:** SM8

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

The data were obtained from a checklist of components that documents data system development. The checklist indicates the degree to which Iowa's Title V data systems have been developed.

**63. Section Number:** State Performance Measure #8

**Field Name:** SM8

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The 2004 data were obtained from a checklist of components that documents data system development. The checklist indicates the degree to which Iowa's Title V data systems have been developed.

**64. Section Number:** State Performance Measure #11

**Field Name:** SM11

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

A survey was conducted with local public health nurses to identify the number of screenings and referrals for children ages 3-5 at the county level. The survey is repeated every year.

**65. Section Number:** State Performance Measure #11

**Field Name:** SM11

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

A survey was conducted with local public health nurses to identify the number of screenings and referrals for children ages 3-5 at the county level. There were 92 out of the 99 counties that replied to the survey. Fifty-one out of 92 are providing screenings and referrals for children ages 3-5.

**66. Section Number:** State Performance Measure #11

**Field Name:** SM11

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

A survey was conducted with local public health nurses to identify the number of screenings and referrals for children ages 3-5 at the county level. There were 97 out of the 99 counties that replied to the survey. Fifty-four out of 97 are providing screenings and referrals for children ages 3-5.

**67. Section Number:** State Performance Measure #13**Field Name:** SM13**Row Name:****Column Name:****Year:** 2002**Field Note:**

Annual performance objectives for 2004-2007 were changed based on improved understanding of the systemic complexities related to fulfilling Part C's role as a statewide resource and database for at-risk young children. The current method to determine the denominator for this performance measure may change pending a review of the agreed upon incidence rate of infants assumed to be at-risk for future developmental delay. The review will occur at the end of ffy03 and will influence the method for calculating the ffy03 annual indicator value.

**68. Section Number:** State Performance Measure #13**Field Name:** SM13**Row Name:****Column Name:****Year:** 2003**Field Note:**

Because the Part C database only tracks developmentally delayed infants and not at-risk infants, the indicator value for this performance measure remains substantially lower than the target objective. The Iowa Title V Programs support improved data capacity to track at-risk infants. A new performance measure and/or new data source will be chosen should the related state priority need be reconfirmed by the upcoming 5-year needs assessment.

**69. Section Number:** State Performance Measure #13**Field Name:** SM13**Row Name:****Column Name:****Year:** 2004**Field Note:**

Because the Part C database only tracks developmentally delayed infants and not at-risk infants, the indicator value for this performance measure remains substantially lower than the target objective. The Iowa Title V Programs support improved data capacity to track at-risk infants. Ideally, a centralized statewide at-risk database will be created, however, much discussion, planning, and organization must occur before this becomes reality.

**70. Section Number:** State Performance Measure #14**Field Name:** SM14**Row Name:****Column Name:****Year:** 2002**Field Note:**

Vital Statistics 2002 Provisional Data  
Numerator - Rate of Black preterm births  
Denominator - Rate of White preterm births

Preterm - less than 37 week gestation.

**71. Section Number:** State Performance Measure #14**Field Name:** SM14**Row Name:****Column Name:****Year:** 2003**Field Note:**

Vital Statistics 2003 Provisional Data  
Numerator - Rate of Black preterm births  
Denominator - Rate of White preterm births

Preterm - less than 37 week gestation.

**72. Section Number:** State Performance Measure #14**Field Name:** SM14**Row Name:****Column Name:****Year:** 2004**Field Note:**

Vital Statistics 2004 Provisional Data  
Numerator - Rate of Black preterm births  
Denominator - Rate of White preterm births

Preterm - less than 37 week gestation.

**73. Section Number:** State Performance Measure #15**Field Name:** SM15**Row Name:****Column Name:****Year:** 2002**Field Note:**

Data were obtained from the Pediatric Nutrition Surveillance System (PedNSS).

**74. Section Number:** State Performance Measure #15**Field Name:** SM15**Row Name:****Column Name:****Year:** 2003**Field Note:**

Data were obtained from the Pediatric Nutrition Surveillance System (PedNSS).

**75. Section Number:** State Performance Measure #15**Field Name:** SM15**Row Name:****Column Name:****Year:** 2004**Field Note:**

Data were obtained from the Pediatric Nutrition Surveillance System (PedNSS).

**76. Section Number:** State Performance Measure #16

**Field Name:** SM16

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

Data were obtained from the WIC parent education survey. A standard definition of parent education has been developed by BFH staff and shared with WIC staff and clients.

Only infants receiving their one year WIC visit were reported for the 2002 data. 2001 data reported infants receiving their one year and eighteen month visit.

**77. Section Number:** State Performance Measure #16

**Field Name:** SM16

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Data were obtained from the WIC parent education survey. A standard definition of parent education has been developed by BFH staff and shared with WIC staff and clients.

Only infants receiving their one year WIC visit were reported for the 2003 data.

**78. Section Number:** State Performance Measure #16

**Field Name:** SM16

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Data were obtained from the WIC parent education survey. A standard definition of parent education has been developed by BFH staff and shared with WIC staff and clients.

Only infants receiving their one year WIC visit were reported for the 2004 data.

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]  
**STATE: IA**

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	7	7	6	6	5.8
Annual Indicator	6.2	5.6	5.2	5.7	5.1
Numerator	238	210	198	216	194
Denominator	38,170	37,597	37,749	38,139	38,369
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	5.8	5.7	5.6	5.5	5.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 02**

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	2.3	3	2.8	2.5	2.9
Annual Indicator	3.5	2.1	2.6	3.8	2.0
Numerator	20.5	11.1	13.4	19.6	9.6
Denominator	5.9	5.4	5.1	5.2	4.8
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	3.1	3.1	3	3	3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	4.5	4.4	3.4	3.3	3.3
Annual Indicator	4.1	3.4	3.5	3.5	3.2
Numerator	156	128	133	135	122
Denominator	38,170	37,597	37,749	38,139	38,369
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	3.2	3.2	3.1	3.1	3.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	1.8	2	2	1.9	1.9
Annual Indicator	2.1	2.2	1.7	2.1	1.9
Numerator	82	82	65	81	72
Denominator	38,170	37,597	37,749	38,139	38,369
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	1.8	1.8	1.7	1.6	1.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.



**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	10.2	10.1	10.1	10	10
Annual Indicator	9.1	9.2	8.4	8.8	8.7
Numerator	347	347	318	334	332
Denominator	38,170	37,597	37,749	38,139	38,369
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	8.5	8.5	8.3	8.3	8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	24.6	24.4	22	21.8	21.6
Annual Indicator	21.5	22.0	19.1	22.1	20.1
Numerator	118	124	108	116	107
Denominator	550,000	564,225	564,225	526,000	532,567
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	21	21	20	20	19
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

## FORM NOTES FOR FORM 12

None

### FIELD LEVEL NOTES

1. **Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data
2. **Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional Data
3. **Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.
4. **Section Number:** Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data
5. **Section Number:** Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional Data.  
The projected annual performance objectives were changed for 2004-20008 based on a five year average of data.
6. **Section Number:** Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.
7. **Section Number:** Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data
8. **Section Number:** Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional Data
9. **Section Number:** Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.
10. **Section Number:** Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data
11. **Section Number:** Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional Data
12. **Section Number:** Outcome Measure 4  
**Field Name:** OM04

**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.

13. **Section Number:** Outcome Measure 5  
**Field Name:** OM05  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data

14. **Section Number:** Outcome Measure 5  
**Field Name:** OM05  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional Data

15. **Section Number:** Outcome Measure 5  
**Field Name:** OM05  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.

16. **Section Number:** Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Vital Statistics 2002 Provisional Data

17. **Section Number:** Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Vital Statistics 2003 Provisional Data

18. **Section Number:** Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data were obtained from Vital Statistics 2004 Provisional Data.

**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: IA**

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

2

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

2

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

1

**Total Score:** 13

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

**FORM NOTES FOR FORM 13**

None

**FIELD LEVEL NOTES**

None

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

[Sec. 505(a)(5)]

**STATE: IA FY: 2006**

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Improve the quality of family support and parenting education programs and services
2. Assure children enrolled in early care and education programs are in quality environments.
3. Assure developmental evaluations are provided to Medicaid enrolled children 0-3 years.
4. Assure access to pediatric specialty care for all children.
5. Minimize developmental delay through early intervention services for children 0-3 years.
6. All children and adolescents should be physically active for at least 30 minutes, limit screen time to no more than two hours, and eat five or more servings of fruits and vegetables each day.
7. Improve the quality of primary care for children in Iowa.
8. Assure access to oral health care for children in Iowa.
9. Reduce infant mortality.
10. Assure pregnant and parenting women are screened and referred to appropriate mental health services.

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: IA

APPLICATION YEAR: 2006

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	Analysis of Iowa's Child and Family Household Health Survey Early Childhood questions	Iowa will be using data from the Child and Family Household Health Survey Early Childhood section to help measure early childhood system building activities	Dr. Pete Damiano - University of Iowa Public Policy Center
2.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	Advancing core public health functions in public health.	System capacity building for maternal and child health infrastructure.	Plenary speaker at the 2006 Spring Public Health Conference.
3.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	Critique of CHSC's various data, assessment, and evaluation methods and analyses to enhance both internal program operations and the impact of external system-building initiatives.	CHSC desires to maximize the effectiveness of its resources and activities on program operations and system development.	MCHB's Center for Evidence-Based Practice (Perrin, Newacheck, et al)
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			



	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

**FORM NOTES FOR FORM 15**

None

**FIELD LEVEL NOTES**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: IA**

SP # 3

**PERFORMANCE MEASURE:**

Percent of children served by Title V, excluding CSHCN, who report a medical home.

**STATUS:**

Active

**GOAL**

To assure continuity of health care and related services for children ages 0-21.

**DEFINITION**

Client has a usual source of medical care that is available 24 hours a day, seven days a week, and maintains the client's record.

**Numerator:**

The number of Title V enrolled children with a reported medical home.

**Denominator:**

The total number of Title V children in the Child and Adolescent Reporting System.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

1-5 Usual Primary Care Provider

Increase the proportion of persons with a usual primary care provider.

**DATA SOURCES AND DATA ISSUES**

The data will be obtained from the Child and Adolescent Reporting System (CAREs). Clients who reported having a usual source of medical care that was available 24 hours a day, seven days a week, and maintain the client's record were considered to have a medical home. Selected criteria from the American Academy of Pediatrics' definition have been chosen for determination of medical home. Children with special health care needs are excluded from this performance measure because medical homes for CSHCN are measured in NPM #3.

**SIGNIFICANCE**

Infants, children, and youth should have preventive and acute or emergency care available continuously and without interruption. The medical care should be coordinated with other health, social, or family support services. Care should be accessible, family centered, continuous, comprehensive, coordinated, compassionate, and culturally appropriate. Title V agencies have the opportunity to secure a medical home for every child served in a child health center and to provide outreach to families and children not participating in health care services. Title V providers as community based agencies are well positioned to work with other public and private entities informing families of availability of medical home services and assisting families in application for various payment plans (Title XXI, Title XIX, private insurance, or Title V).

SP # 4

**PERFORMANCE MEASURE:**

Percent of low income children ages 1-4, enrolled in child health centers who have completed a referral to a dentist.

**STATUS:**

Active

**GOAL**

To assure low income children access to dental health services (preventive and restorative care).

**DEFINITION**

Children who are enrolled in a Title V Child Health Agencies who have completed a referral to a dentist.

**Numerator:**

Number of children MCH eligible ages 1-4 referred from child health centers who complete a dental referral.

**Denominator:**

Number of children enrolled in child health centers, MCH eligible ages 1-4.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

21-21 Dental Services for Low-Income Children.

Increase the proportion of children and adolescents under age 19 years at or below 200 percent of the Federal Poverty level who received any preventive dental services during the past year.

**DATA SOURCES AND DATA ISSUES**

Data from child health clinics

**SIGNIFICANCE**

Access and availability of dental health services for children were rated within the top four priorities of the 2000 Iowa Department of Public Health, Maternal, and Child Health Needs Assessment. Dental access to low income families is limited within Iowa due to a number of barriers including: lack of financial resources, lack of pediatric dentists trained to treat very young children with early childhood caries, shortage of dentists participating in the Medicaid program due to low reimbursement rates, issues of patient compliance (e.g., frequency of broken appointments), and perceived bureaucratic barriers associated with participating in the program (e.g., increased paperwork, slow payments).

SP # 8

**PERFORMANCE MEASURE:**

The degree to which key data are collected, managed, analyzed, and utilized for strategic assessment of the determinants and consequences of the health status of women, children, and families.

**STATUS:**

Active

**GOAL**

To identify priority needs and assess progress in meeting those needs for current and new target populations.

**DEFINITION**

Attached is a checklist of components that document data system development. The checklist indicates the degree to which the Iowa Title V data system has been developed.

**Numerator:**

NA

**Denominator:**

NA

**Units:** 96 **Text:** Scale

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Survey of Title V and other relevant organizations' data system components and utilization. Resources for developing electronic data system for program data that meet the needs of local service providers are not readily available.

**SIGNIFICANCE**

Elements needed to build a supportive data capacity exist within the state's Title V program. Currently, vital records are a key source of information for needs assessment and most performance monitoring, but utilization is less than optimal. Efforts to link vital records and program data have the potential to enhance surveillance and diagnose emerging issues. Establishing priorities and upgrading resources can improve productivity and effectiveness.

SP # 11

**PERFORMANCE MEASURE:**

Percent of counties that report screenings and referrals for behavioral problems in young children (ages 3-5).

**STATUS:**

Active

**GOAL**

To improve the likelihood that children who are in need of mental health or behavioral services receive those services from a provider with documented specialty skills in child mental/behavioral health.

**DEFINITION**

A survey is conducted with the Public Health Nurses to determine the number of screenings and referrals for three to five year old children.

**Numerator:**

Number of counties reporting screenings and referrals.

**Denominator:**

Number of counties in Iowa.

**Units:** 100    **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

18-7 Treatment for children with mental health problems.

Increase the proportion of children with mental health problems who received treatment.

**DATA SOURCES AND DATA ISSUES**

A survey will be conducted with the counties to assess access to screening and referral services for children ages 3-5 with behavioral problems.

**SIGNIFICANCE**

Mental health problems in children have gained increasing attention and priority in the national state public health systems over the last two decades. Using state and local collaborative relationships, Iowa's Title V program has the opportunity to foster the development of an integrated and comprehensive mental health services system are screening and referral activities.

SP # 13

**PERFORMANCE MEASURE:**

Percent of infants determined to be at-risk receiving monitoring and follow-up services at age 12 months.

**STATUS:**

Active

**GOAL**

To increase participation of at-risk infants in programs that provide effective monitoring and follow-up for the at-risk population.

**DEFINITION**

**Numerator:**

The number of Iowa live infants in a calendar year birth cohort who have been identified as being at-risk and who are enrolled in the Iowa Early ACCESS Program (IDEA Part C) by 12 months of age.

**Denominator:**

The number of live Iowa infants in the same calendar year birth cohort who have been identified as being at-risk. (This number initially may be estimated as 12% of the number of live births in a calendar year birth cohort.)

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Use vital statistics, program data sharing agreements, and at-risk incidence rate estimates to determine denominator. Use Iowa Early ACCESS enrollment data to determine the numerator.

**SIGNIFICANCE**

Selected physiological and psychosocial circumstances are associated with adverse developmental sequelae. Follow-up and monitoring programs are designed to detect developmental problems as early as possible and refer to early intervention services. In Iowa, the Early ACCESS Program is responsible for enrolling all infants in the state who are identified as being at-risk. Early ACCESS will function as a single statewide registry for at-risk infants and will be effective in obtaining early intervention services for infants who show developmental delay during follow-up and monitoring.

SP # 14

**PERFORMANCE MEASURE:**

Ratio of black-to-white preterm births.

**STATUS:**

Active

**GOAL**

To reduce the ratio of black-to-white preterm births to no more than 1.0 (indicating no disparity.)

**DEFINITION**

Preterm birth is defined as live birth at less than 37 weeks gestation.

**Numerator:**

Rate of black preterm live births annually (rate per 1000)

**Denominator:**

Rate of white preterm live births annually (rate of 1000)

**Units:** 1   **Text:** Ratio

**HEALTHY PEOPLE 2010 OBJECTIVE**

16-11

Reduce preterm births.

**DATA SOURCES AND DATA ISSUES**

Iowa Vital Records, Maternal Health Database

**SIGNIFICANCE**

In Iowa, the black infant preterm birth rate is more than two times the white rate. In calendar year 1998, the black infant preterm birth rate was 131.4 per 1,000 compared with the white rate of 62 per 1,000. Among the leading causes of death in infants, the racial and ethnic disparity is greatest in disorders related to preterm birth, including respiratory disease, infections, and nutritional deficits. Women in low socioeconomic status and girls under the age of 18 statistically have poorer birth outcomes than other women. Enhanced services increase the likelihood of better birth outcomes by providing care coordination services.



SP # 15

**PERFORMANCE MEASURE:**

Percent of WIC clients, ages 2-5 years, that are overweight at or above the 95th percentile as defined by PedNSS.

**STATUS:**

Active

**GOAL**

Improve the fitness of Iowa children

**DEFINITION**

PedNSS data classifies overweight as 95th percentile based on weight and height.

**Numerator:**

Number of children aged 2-5 years of get on the WIC program who meet the definition of obesity.

**Denominator:**

Number of children ages 2-5 years of age on the WIC program.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

19-3 Overweight or obesity in children and adolescents.

Reduce the proportion of children and adolescents who are overweight or obese.

**DATA SOURCES AND DATA ISSUES**

Pediatric Nutrition Surveillance System (PedNSS)

**SIGNIFICANCE**

Obesity in children is on the rise in all age groups as demonstrated from the PedNSS data and nationwide surveys such as the National Health and Nutrition Examination Surveys. IDPH conducts WIC programs providing nutrition education in all counties and has infrastructure to ensure provision of child health services in all counties. Through the Iowa Dept. of Education, contact can be made with school nurse, athletic directors, physical education teachers, counselors, and classroom teachers. Nutrition education is promoted through the school lunch program. The Team Nutrition effort has been popular in Iowa and is expanding to 30 schools. The Iowa Nutrition Education Network seeks grant funds to promote nutrition education activities through social marketing campaigns and mini grants to local communities. A Child and Adolescent Obesity Task Force was formed to address the specific problem of child obesity.

SP # 16

**PERFORMANCE MEASURE:**

Percent of families of 1 year old children enrolled in WIC who have participated in parenting education.

**STATUS:**

Active

**GOAL**

To increase the number of parents who are participating in parenting education.

**DEFINITION**

The definition of parent education that the Division of Community Health has established: "Parenting education is a planned approach to providing parents with information that can help them promote their child's development."

**Numerator:**

Number of 1 year of children whose parents participated in a parenting education class.

**Denominator:**

Number of 1 year old children on WIC program.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Focus Area- Chapter 16 - Maternal, Infants, and Child Health

**DATA SOURCES AND DATA ISSUES**

WIC database and a survey completed by IDPH

**SIGNIFICANCE**

Parent education is a broad term applied in this definition to opportunities provided for parents and potential parents of children from birth to 18 years of age in the subject areas of parenting skills and practices, child growth and development, and family interaction/communication. Families fluctuate from stages of secure and nurturing to times of problems and challenges with parenting their children. It is essential every community in Iowa have parent education available from which families can easily access information. Providing parent education through a variety of sources and methods will give families choices for different levels of literacy, culture, format, and focus to meet the individual family needs.

**FORM NOTES FOR FORM 16**

None

**FIELD LEVEL NOTES**

None

**FORM 17**  
**HEALTH SYSTEMS CAPACITY INDICATORS**  
**FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA**  
**STATE: IA**

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	53.0	53.0	53.0	48.4	
Numerator	999	999	962	875	
Denominator	188,413	188,413	181,603	180,839	
Is the Data Provisional or Final?				Final	

**HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	90.4	91.9	92.3	99.9	99.9
Numerator	13,003	13,855	14,649	16,495	17,565
Denominator	14,388	15,075	15,874	16,508	17,590
Is the Data Provisional or Final?				Final	Final

**HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	0.0	100.0	100.0	100.0	100.0
Numerator	0	11	2	3	6
Denominator	5	11	2	3	6
Is the Data Provisional or Final?				Final	Final

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	72.7	69.0	77.0	75.4	76.2
Numerator	26,870	25,899	29,024	28,757	29,096
Denominator	36,960	37,545	37,694	38,139	38,159
Is the Data Provisional or Final?				Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 07**

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	42.0	45.7	41.8	55.0	51.9
Numerator	14,513	16,175	16,221	22,440	22,678
Denominator	34,565	35,395	38,771	40,810	43,717
Is the Data Provisional or Final?				Final	Final

**HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	93.0	93.0	98.4	98.7	92.4
Numerator	743	639	803	1,203	1,201
Denominator	799	687	816	1,219	1,300
Is the Data Provisional or Final?				Final	Final

## FORM NOTES FOR FORM 17

Our Iowa Title V definition of rehabilitative services includes mailing a detailed letter to each family of a child determined eligible for SSI. The letter reiterates the beneficiary's automatic eligibility for Medicaid, as well as describes additional Title V CYSHCN services that may be of use or interest. The SSI enrollees who do NOT receive a letter (i.e. are counted in the denominator, but not numerator) are directly under the supervision of the Iowa Dept of Human Services or a hospital facility.

### FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2001 data were obtained from the Iowa Hospital Association data. The 2002 data will not be released until later in December of 2003.
2. **Section Number:** Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The 2003 data were obtained from the Iowa Hospital Association data. The 2004 data will not be released until later in December of 2005.
3. **Section Number:** Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The 2004 data will not be released until later in December of 2005.
4. **Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 data were obtained from the Annual EPSDT Participation Report - HCFA 416 Report.
5. **Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The 2003 data were obtained from the Annual EPSDT Participation Report - CMS 416 Report.
6. **Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The 2004 data were obtained from the Annual EPSDT Participation Report - CMS 416 Report.
7. **Section Number:** Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The small number is due to financial eligibilty at 185 percent poverty level. Most infants who qualify for public health insurance qualify for Medicaid.
8. **Section Number:** Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The small number is due to financial eligibilty at 185 percent poverty level. Most infants who qualify for public health insurance qualify for Medicaid.
9. **Section Number:** Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The small number is due to financial eligibilty at 185 percent poverty level. Most infants who qualify for public health insurance qualify for Medicaid.
10. **Section Number:** Health Systems Capacity Indicator #04  
**Field Name:** HSC04  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data for the percent of women with a live birth during 2002 whose observed to expected prenatal visits is greater than or equal to 80 percent on the Kotekchuck Index were obtained from the 2002 Provisional Vital Statistics.
11. **Section Number:** Health Systems Capacity Indicator #04  
**Field Name:** HSC04  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
.

12. **Section Number:** Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The HSCI #4 data differs from the NPM #18 because HSCI #4 uses women ages 15-44 and NPM #18 uses women of all ages.

13. **Section Number:** Health Systems Capacity Indicator #07

**Field Name:** HSC07

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

The 2002 data were obtained from the Annual EPSDT Participation Report - HFCA 416.

14. **Section Number:** Health Systems Capacity Indicator #07

**Field Name:** HSC07

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

The 2003 data were obtained from the Annual EPSDT Participation Report - CMS416.

15. **Section Number:** Health Systems Capacity Indicator #07

**Field Name:** HSC07

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The 2004 data were obtained from the Annual EPSDT Participation Report - CMS 416.

16. **Section Number:** Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Our Iowa Title V definition of rehabilitative services includes mailing a detailed letter to each family of a child determined eligible for SSI. The letter reiterates the beneficiary's eligibility for Medicaid, as well as describes additional Title V CYSHCN services that may be useful or of interest.

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #05**  
**(MEDICAID AND NON-MEDICAID COMPARISON)**  
**STATE: IA**

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) Percent of low birth weight (< 2,500 grams)	2003	Matching data files	<u>8.5</u>	<u>5.9</u>	<u>6.6</u>
b) Infant deaths per 1,000 live births	2003	Matching data files	<u>6</u>	<u>5</u>	<u>5.3</u>
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2003	Matching data files	<u>79.3</u>	<u>91.5</u>	<u>88.7</u>
d) Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2003	Matching data files	<u>65.9</u>	<u>78.3</u>	<u>75.4</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06 (MEDICAID ELIGIBILITY LEVEL)**  
**STATE: IA**

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2004	<u>185</u>
b) Medicaid Children (Age range <u>1</u> to <u>18</u> ) (Age range <u>      </u> to <u>      </u> ) (Age range <u>      </u> to <u>      </u> )	2004	<u>133</u> <u>      </u> <u>      </u>
c) Pregnant Women	2004	<u>185</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06 (SCHIP ELIGIBILITY LEVEL)**  
**STATE: IA**

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2004	<u>200</u>
b) Medicaid Children (Age range <u>1</u> to <u>18</u> ) (Age range <u>      </u> to <u>      </u> ) (Age range <u>      </u> to <u>      </u> )	2004	<u>200</u> <u>      </u> <u>      </u>
c) Pregnant Women	2004	<u>200</u>



## FORM NOTES FOR FORM 18

None

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 05  
**Field Name:** CareFirstTrimester  
**Row Name:** Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data obtained for NPM #18 uses a different data source.
2. **Section Number:** Indicator 05  
**Field Name:** AdequateCare  
**Row Name:** Percent of pregnant women with adequate prenatal care  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The percent of pregnant women with adequate prenatal care is 2003 data.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: IA**

**HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)**  
*(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)*

<b>DATABASES OR SURVEYS</b>	<b>Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *</b>	<b>Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)</b>
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	Yes
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	3	Yes
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	3	No
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	No

\*Where:  
1 = No, the MCH agency does not have this ability.  
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.  
3 = Yes, the MCH agency always has this ability.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: IA**

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	2	No
Other: Iowa Youth Survey	2	No

**HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity**  
*(The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)*

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	2	No
Pediatric Nutrition Surveillance System (PedNSS)	2	No
WIC Program Data	3	No
Other: Iowa Child and Family Household Health Survey	3	Yes
Iowa Oral Health Survey (includes height/weight)	3	Yes

\*Where:

1 = No

2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.

3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

**Notes:**

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

## FORM NOTES FOR FORM 19

None

### FIELD LEVEL NOTES

**1. Section Number:** Indicator 09A

**Field Name:** BAN

**Row Name:** Annual linkage of birth certificates and newborn screening files

**Column Name:**

**Year:** 2006

**Field Note:**

Data from birth certificates and neonatal metabolic screens are matched each month. The resulting data set, called Child Discovery, is used by the Center for Congenital and Inherited Disorders (CCID) to identify infants born in Iowa that did not receive the neonatal metabolic screens. Program staff in CCID contact the infants' delivering facility and physician of record to notify them of the missed screens.

**2. Section Number:** Indicator 09A

**Field Name:** BirthDefects

**Row Name:** Annual birth defects surveillance system

**Column Name:**

**Year:** 2006

**Field Note:**

Due to IDPH organizational restructuring, the Center for Congenital and Inherited Disorders became a program component of the Bureau of Family Health (BFH) in FFY2005. This organizational change brought the Iowa Registry for Congenital and Inherited Disorders under the regulation of the state genetics coordinator within BFH. This resulted in improved MCH access to the electronic surveillance system.

**3. Section Number:** Indicator 09B

**Field Name:** Other1\_09B

**Row Name:** Other

**Column Name:**

**Year:** 2006

**Field Note:**

The 2002 Iowa Youth Survey was the 10th in a series of youth surveys that have been completed every three years in Iowa. Participation was sought from all public school districts and all students in grades 6, 8 and 11, as well as 14-18 year-old students in alternative programs. Participation was also sought from all non-public schools in the state. A total of 96,971 public and private school students across the state completed the IYS. Each Iowa county except one was represented by at least 170 students participating in the survey.

**4. Section Number:** Indicator 09C

**Field Name:** Other1\_09C

**Row Name:** Other

**Column Name:**

**Year:** 2006

**Field Note:**

The 2000 Iowa Child and Family Household Health Survey was a collaborative effort of the University of Iowa Public Policy Center, the Iowa Department of Public Health, and Child Health Specialty Clinics. The intent of the study was to provide information for policymakers and health planners about the status of families with children in Iowa from a social health perspective. It was funded, in part, by a competitive grant from the Maternal and Child Health Bureau, Health Resources and Services Administration, US Department of Health and Human Services.

The survey utilized a telephone interview conducted with a stratified random sample of 3241 families with children in Iowa. Replication of the Iowa Child and Family Household Health Survey is scheduled for September 2005.

For the fifth consecutive year, the Iowa Department of Public Health (IDPH) completed the statewide Oral Health Survey in 2005. With direction from the IDPH Oral Health Bureau, the survey was conducted by the state's Title V child health contract agencies. The Title V agencies screened a random sample of 1,701 third-grade children in 29 schools. Each screening included measurement of the child's height and weight.

**FORM 20**  
**HEALTH STATUS INDICATORS #01-#05**  
**MULTI-YEAR DATA**  
**STATE: IA**

**HEALTH STATUS INDICATOR MEASURE # 01A**

The percent of live births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	6.1	6.4	6.7	6.6	7.0
Numerator	2,342	2,410	2,511	2,519	2,692
Denominator	38,170	37,597	37,749	38,139	38,355
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 01B**

The percent of live singleton births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	4.7	4.8	5.0	4.9	5.3
Numerator	1,718	1,753	1,808	1,800	1,946
Denominator	36,945	36,347	36,438	36,809	37,039
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 02A**

The percent of live births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.3	1.2	1.2	1.2	1.3
Numerator	491	437	444	443	506
Denominator	38,170	37,597	37,749	38,139	38,355
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 02B**

The percent of live singleton births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	0.9	0.9	0.8	0.9	1.0
Numerator	342	319	301	317	369
Denominator	36,945	36,347	36,438	36,809	37,039
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 03A**

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	7.8	6.2	8.5	5.8	11.1
Numerator	47	37	51	33	63
Denominator	601,563	601,563	601,563	572,000	569,387
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 03B**

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	3.3	3.5	4.3	4.5	6.7
Numerator	20	21	26	26	38
Denominator	601,563	601,563	601,563	572,000	569,387
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 03C**

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	28.1	23.0	22.1	26.5	21.8
Numerator	121	99	95	117	96
Denominator	430,083	430,083	430,083	441,000	440,974
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 04A**

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	316.8	338.6	286.6	NaN	NaN
Numerator	1,906	2,037	1,724	0	0
Denominator	601,563	601,563	601,563	0	0
Is the Data Provisional or Final?				Provisional	Provisional

**HEALTH STATUS INDICATOR MEASURE # 04B**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	608.7	566.0	291.1	309.3	324.0
Numerator	3,662	3,405	1,751	1,761	1,845
Denominator	601,563	601,563	601,563	569,387	569,387
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 04C**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	2,729.2	2,681.8	1,801.0	1,318.6	1,283.5
Numerator	11,738	11,534	7,942	7,508	7,308
Denominator	430,083	430,083	440,974	569,387	569,387
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 05A**

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	17.3	10.6	16.5	17.9	20.0
Numerator	1,912	1,176	1,827	1,865	2,061
Denominator	110,500	110,644	110,644	104,394	103,272
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 05B**

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	5.0	4.9	5.6	5.8	6.0
Numerator	2,459	2,438	2,792	2,927	3,014
Denominator	493,000	500,570	500,570	504,707	499,730
Is the Data Provisional or Final?				Final	Provisional

## FORM NOTES FOR FORM 20

None

### FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #04A  
**Field Name:** HSI04A  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The data for this HSI were obtained from the Hospital Discharge Data. The 2003 data will be available in September 2005.
2. **Section Number:** Health Status Indicator #04A  
**Field Name:** HSI04A  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The 2003 hospital discharge data is not available for non-fatal injuries. The data will be available by the fall of 2005.
3. **Section Number:** Health Status Indicator #04A  
**Field Name:** HSI04A  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The 2004 hospital discharge data is not available for non-fatal injuries.
4. **Section Number:** Health Status Indicator #04B  
**Field Name:** HSI04B  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The data for this HSI were obtained from the DOT data system. The DOT is currently in the process of changing the data system. The 2002 data are not available until next year.
5. **Section Number:** Health Status Indicator #04B  
**Field Name:** HSI04B  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The DOT is currently in the process of changing the data system. The 2002 and 2003 data are not available until December 2004.
6. **Section Number:** Health Status Indicator #04B  
**Field Name:** HSI04B  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data for this HSI were obtained from the DOT data system. The DOT is currently in the process of changing the data system. The 2004 Census data for children 14 years and younger was not available. The 2004 denominator is the 2003 Census data.
7. **Section Number:** Health Status Indicator #04C  
**Field Name:** HSI04C  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The data for this HSI were obtained from the DOT data system. The DOT is currently in the process of changing the data system. The 2002 data are not available until next year.
8. **Section Number:** Health Status Indicator #04C  
**Field Name:** HSI04C  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The DOT is currently in the process of changing the data system. The 2002 and 2003 data are not available until December 2004.
9. **Section Number:** Health Status Indicator #04C  
**Field Name:** HSI04C  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data for this HSI were obtained from the DOT data system. The DOT is currently in the process of changing the data system. The 2004 Census data for children 15 to 24 years was not available. The 2004 denominator is the 2003 Census data.



**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: IA**

**HSI #06A - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	36,820	33,847	1,093	186	632	20	1,042	0
Children 1 through 4	144,783	132,961	4,468	691	2,655	66	3,942	0
Children 5 through 9	185,348	170,091	6,474	911	3,298	96	4,478	0
Children 10 through 14	202,436	188,325	6,768	1,004	2,945	71	3,323	0
Children 15 through 19	211,983	199,017	6,084	968	3,345	105	2,464	0
Children 20 through 24	228,991	213,622	6,576	1,038	5,192	236	2,327	0
Children 0 through 24	1,010,361	937,863	31,463	4,798	18,067	594	17,576	0

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	34,637	2,183	0
Children 1 through 4	135,935	8,848	0
Children 5 through 9	174,945	10,403	0
Children 10 through 14	193,732	8,704	0
Children 15 through 19	204,378	7,605	0
Children 20 through 24	219,070	9,921	0
Children 0 through 24	962,697	47,664	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: IA**

**HSI #07A - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	25	20	3	1	0	0	0	1
Women 15 through 17	895	760	101	14	12	0	0	8
Women 18 through 19	2,340	2,087	182	17	33	1	0	20
Women 20 through 34	30,840	28,620	1,103	192	766	4	0	155
Women 35 or older	4,255	3,985	72	15	159	2	0	22
Women of all ages	38,355	35,472	1,461	239	970	7	0	206

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	21	4	0
Women 15 through 17	764	126	5
Women 18 through 19	2,040	282	18
Women 20 through 34	28,582	2,180	78
Women 35 or older	4,003	240	12
Women of all ages	35,410	2,832	113

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: IA**

**HSI #08A - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Final

<b>CATEGORY TOTAL DEATHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	216	184	25	0	2	0	0	5
Children 1 through 4	40	36	1	0	3	0	0	0
Children 5 through 9	30	27	2	0	0	0	0	1
Children 10 through 14	47	44	0	0	1	0	0	2
Children 15 through 19	119	111	4	0	2	0	0	2
Children 20 through 24	163	146	7	0	1	0	0	9
Children 0 through 24	615	548	39	0	9	0	0	19

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

<b>CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	199	17	0
Children 1 through 4	35	5	0
Children 5 through 9	29	1	0
Children 10 through 14	44	2	0
Children 15 through 19	119	2	0
Children 20 through 24	149	9	0
Children 0 through 24	575	36	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: IA**

**HSI #09A - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	781,370	724,241.0	24,887.0	3,760.0	12,875.0	358.0	15,249.0	0	2004
Percent in household headed by single parent	28.2	28.1	43.1	0	28.6	0	17.9	13.7	2004
Percent in TANF (Grant) families	3.8	3.5	20.6	9.2	1.8	0	0	2.8	2004
Number enrolled in Medicaid	155,881	102,574.0	16,478.0	1,123.0	1,598.0	0	0	34,108.0	2004
Number enrolled in SCHIP	18,722	15,102.0	464.0	93.0	169.0	11.0	0	2,883.0	2004
Number living in foster home care	4,673	3,664.0	623.0	95.0	44.0	15.0	133.0	99.0	2004
Number enrolled in food stamp program	87,155	54,923.0	12,229.0	665.0	758.0	0	0	18,580.0	2004
Number enrolled in WIC	59,396	51,778.0	5,819.0	449.0	1,350.0	0	0	0	2004
Rate (per 100,000) of juvenile crime arrests	2,754.0	2,472.0	12,452.0	5,452.0	1,553.0	0	0	724.0	2004
Percentage of high school drop-outs (grade 9 through 12)	2.4	2.1	5.0	7.6	1.7	0	0	0	2004

**HSI #09B - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	743,627.0	37,743.0	0	2004
Percent in household headed by single parent	28.3	11.4	0	2004
Percent in TANF (Grant) families	3.6	6.0	0	2004
Number enrolled in Medicaid	155,881.0	12,928.0	0	2004
Number enrolled in SCHIP	18,722.0	956.0	0	2004
Number living in foster home care	4,260.0	242.0	0	2004
Number enrolled in food stamp program	87,155.0	6,685.0	0	2004
Number enrolled in WIC	59,396.0	11,170.0	0	2004
Rate (per 100,000) of juvenile crime arrests	2,686.0	3,226.0	2.0	2004
Percentage of high school drop-outs (grade 9 through 12)	2.4	5.9	0	2004

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: IA**

**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	330,192
Living in urban areas	242,767
Living in rural areas	325,650
Living in frontier areas	200,167
<b>Total - all children 0 through 19</b>	<b>768,584</b>

**Note:**

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: IA**

**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	2,954,451.0
Percent Below: 50% of poverty	4.2
100% of poverty	8.9
200% of poverty	25.9

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: IA**

**HSI #12 - Demographics (Poverty Levels)** *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	768,298.0
Percent Below: 50% of poverty	6.8
100% of poverty	13.4
200% of poverty	30.4

## FORM NOTES FOR FORM 21

Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race data is 2003 data. We are unable to get 2004 provisional data.

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_Children  
**Row Name:** All children 0 through 19  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Demographic data are obtained from 2003 Census.
2. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_TANFPercent  
**Row Name:** Percent in TANF (Grant) families  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data are obtained from the Feb. 2005 report
3. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data are obtained from the May 2005 hawk-i report
4. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_TANFPercent  
**Row Name:** Percent in TANF (Grant) families  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data are obtained from the February 2005 report.
5. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data are obtained from the May 2005 hawk-i report
6. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_FoodStampNo  
**Row Name:** Number enrolled in food stamp program  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data are obtained from February 2005 report
7. **Section Number:** Indicator 10  
**Field Name:** Metropolitan  
**Row Name:** Living in metropolitan areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Demographic data for metropolitan living were obtained from 2003 Census data.
8. **Section Number:** Indicator 10  
**Field Name:** Urban  
**Row Name:** Living in urban areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Demographic data for urban living were obtained from 2003 Census data.
9. **Section Number:** Indicator 10  
**Field Name:** Rural  
**Row Name:** Living in rural areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Demographic data for urban living were obtained from 2003 Census data.
10. **Section Number:** Indicator 10  
**Field Name:** Frontier  
**Row Name:** Living in frontier areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Demographic data for frontier living were obtained from 2003 Census data.
11. **Section Number:** Indicator 11  
**Field Name:** S11\_total  
**Row Name:** Total Population  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Demographic data for total population were obtained from 2004 Census data.
12. **Section Number:** Indicator 11  
**Field Name:** S11\_50percent  
**Row Name:** Percent Below: 50% of poverty

**Column Name:**

**Year:** 2006

**Field Note:**

Demographic data for 50% of poverty were obtained from 2003 Census data.

**13. Section Number:** Indicator 11

**Field Name:** S11\_100percent

**Row Name:** 100% of poverty

**Column Name:**

**Year:** 2006

**Field Note:**

Demographic data for 100% of poverty were obtained from 2003 Census data.

**14. Section Number:** Indicator 11

**Field Name:** S11\_200percent

**Row Name:** 200% of poverty

**Column Name:**

**Year:** 2006

**Field Note:**

Demographic data for 200% of poverty were obtained from 2003 Census data.

**15. Section Number:** Indicator 12

**Field Name:** S12\_Children

**Row Name:** Children 0 through 19 years old

**Column Name:**

**Year:** 2006

**Field Note:**

Demographic data for children 0-19 years were obtained from 2004 Census data.

**16. Section Number:** Indicator 12

**Field Name:** S12\_50percent

**Row Name:** Percent Below: 50% of poverty

**Column Name:**

**Year:** 2006

**Field Note:**

Demographic data for 50% of poverty were obtained from 2003 Census data.

**17. Section Number:** Indicator 12

**Field Name:** S12\_100percent

**Row Name:** 100% of poverty

**Column Name:**

**Year:** 2006

**Field Note:**

Demographic data for 100% of poverty were obtained from 2004 Census data.

**18. Section Number:** Indicator 12

**Field Name:** S12\_200percent

**Row Name:** 200% of poverty

**Column Name:**

**Year:** 2006

**Field Note:**

Demographic data for 200% of poverty were obtained from 2004 Census data.

**19. Section Number:** Indicator 09B

**Field Name:** HSI\_Ethnicity\_FosterCare

**Row Name:** Number living in foster home care

**Column Name:**

**Year:** 2006

**Field Note:**

Data are obtained from April 2005 report.

**NEW STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: IA**

SP # 1

**PERFORMANCE MEASURE:**

Percent of Community Empowerment Areas funded family support programs identified as evidence-based practices.

**GOAL**

To increase the percent of Community Empowerment Areas that fund evidenced-based family support and parent education programs.

**DEFINITION**

Iowa is currently working on developing evidenced based criteria for Community Empowerment Areas.

**Numerator:**

Number of Community Empowerment funded family support programs funding research based programs.

**Denominator:**

Number of Community Empowerment Areas in Iowa.

**Units:**    **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

7-7 Increase the proportion of health care organizations that provide patient and family education.

**DATA SOURCES AND DATA ISSUES**

Community Empowerment Data Report - Home Visitation

**SIGNIFICANCE**

Research has shown that high quality family support programs enable and empower families by enhancing and promoting individual and family capacities that support and strengthen family functioning. Family support programs and services strengthen adults in their roles as parents, nurturers, and providers.

**OBJECTIVE**

2006	2007	2008	2009	2010
2	10	15	20	25



SP # 2

**PERFORMANCE MEASURE:**

Number of early care and education providers who receive child care nurse consultant training or services.

**GOAL**

Improve the quality of health and safety in early care and education by increasing the number of early care and education providers receiving child care nurse consultant services.

**DEFINITION**

Through the Healthy Child Care Iowa Campaign, child care nurses consultant offer training and technical assistance to early learning providers.

**Numerator:**

Number of early care and education providers who receive a service from a child care nurse consultant

**Denominator:**

Number of early care and education providers in Iowa.

**Units:**    **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

none

**DATA SOURCES AND DATA ISSUES**

Healthy Child Care Iowa Encounter Data Child Care Resource and Referral Data

**SIGNIFICANCE**

Early care and education providers are responsible for the well-being of children enrolled in their facility. The health and safety of children enrolled is a prime concern. Early care and education providers need accessible health care professionals as partners to improve the health and safety components of their business. Child care nurse consultants delivering direct services (on-site consultation, face-to-face services and training) to early care and education providers help providers improve the health and safety components.

**OBJECTIVE**

2006	2007	2008	2009	2010
1200	1224	1248	1273	1299

SP # 3

**PERFORMANCE MEASURE:**

Percent of Medicaid enrolled children 0-3 years who receive developmental evaluations.

**GOAL**

Assure developmental evaluations are provided to Medicaid enrolled children 0-3 years.

**DEFINITION**

A development evaluation is periodic reviews of a child's development as an integrated part of a well-child examination to include a review of developmental milestones, behavior, family risk factors, and parent concerns.

**Numerator:**

The number of developmental evaluations provided to Medicaid enrolled children 0-3 during the reporting year.

**Denominator:**

The total number of Medicaid enrolled children 0-3 during the reporting year.

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

18-7 Treatment for children with mental health problems.

Increase the proportion of children with mental health problems who receive treatment.

**DATA SOURCES AND DATA ISSUES**

HCFA 4.16 Report Medicaid claims data: Fee for Service and Encounter data.

**SIGNIFICANCE**

Behavioral, mental health, and social-emotional problems in children have gained increasing attention and priority in the national and state public health systems in the last several years. Recent studies indicate that 12 percent to 16 percent of children experience developmental problems, but that only one-third of those children are identified in pediatric practices prior to school entry. Using state and local collaborative relationships, Iowa's Title V program has the opportunity to foster the development of a seamless and comprehensive system of screening, assessment, and referral services.

**OBJECTIVE**

2006	2007	2008	2009	2010
5	7	10	12	15

SP # 4

**PERFORMANCE MEASURE:**

Percent of children who needed care from a specialist who received the care without problem.

**GOAL**

Assure access to pediatric specialty care for all children.

**DEFINITION**

The percentage value will be obtained by dividing the numerator (defined below) by the denominator (defined below) and then multiplying the quotient by 100.

**Numerator:**

Number of children who needed specialized care and received it without problem.

**Denominator:**

Number of children who needed specialized care.

**Units:**    **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

16-22 - Increase the proportion of CYSHCN who have access to a medical home.

16-23 - Increase the proportion of Territories and States that have service systems for CYSHCN.

**DATA SOURCES AND DATA ISSUES**

Data Source: Iowa Child and Family Household Health Survey conducted by the Iowa Department of Public Health, Child Health Specialty Clinics, and University of Iowa Public Policy Center. Data Issues: The data for this performance measure is based on parent report of "need" and "problem" meeting the need. There are no descriptors offered to parent survey respondents to help standardize the concepts of "need" or "problem." That the survey uses a population-based, random sample design strengthens the assumption that the responses are a valid, unbiased representation of family experience.

**SIGNIFICANCE**

Specialty care is one essential component of a comprehensive system of care for all children. Concepts of systems, medical home, and collaborative partnership manifest prominently in discussions of quality improvement and cost-effectiveness. With estimates ranging as high as 30 percent of all children having a need at some time for specialty care, access to specialists is naturally a relevant concern. Geographical inaccessibility and higher cost of specialty care remain formidable problems.

**OBJECTIVE**

2006	2007	2008	2009	2010
83	87	92	96	99

SP # 5

**PERFORMANCE MEASURE:**

Percent of children 0-3 years served by Early ACCESS (IDEA, Part C).

**GOAL**

Minimize developmental delay through early intervention services for children 0-3 years.

**DEFINITION**

Early ACCESS serves children 0-3 years with a development delay of 25% or greater or a risk of development delays.

**Numerator:**

Number of children 0-3 years served by Part C - Early ACCESS.

**Denominator:**

Number of children 0-3 years.

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

16-14 Reduce the occurrence of developmental disabilities.

**DATA SOURCES AND DATA ISSUES**

Early ACCESS data - OSEP -- OSEP recommends that EA serve 2% of children 0-3 years of age and 1% of children 0-1. in 2004, EA served 1.11% of 0-1 year olds and 2.07% of 0-3 year olds. A future indicator will be the success at which premature infants and children with other qualifying health conditions are served by Early ACCESS. EA data cannot currently differentiate the condition for which the child was enrolled, but that may be a possibility in the future.

**SIGNIFICANCE**

CHSC and the IDPH continue close collaboration with Early ACCESS to improve the early intervention system for children 0-3. Research has shown that for children with or at-risk for developmental delay, the earlier that intervention can be provided, the greater chance for the child's improved outcomes. By providing early intervention services to the child and family at the earliest possible time, potential later costs to society can be reduced.

**OBJECTIVE**

2006	2007	2008	2009	2010
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SP # 6

**PERFORMANCE MEASURE:**

Number of Iowa counties that have at least one participating targeted community in the CDC nutrition and physical activity obesity prevention project.

**GOAL**

Improve physical fitness of children and adolescents by achieving the following: 1. Seventy-five percent of Iowa children and adolescents in targeted communities will be physically active for 30 minutes daily and moderately active for 60 minutes daily by January 2010. 2. Seventy-five percent of Iowa children and adolescents in targeted communities will limit screen time to no more than two hours daily by January 2010. 3. Seventy-five percent of Iowa children and adolescents in targeted

**DEFINITION**

**Numerator:**

Number of Iowa Counties participating in the CDC nutrition and physical activity obesity prevention project.

**Denominator:**

Number of Iowa Counties.

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

22-6 Increase the proportion of adolescents who engage in moderate physical activity for 30 minutes.

22-18 Increase the proportion of adolescents who view tv two or fewer hours on a school day.

**DATA SOURCES AND DATA ISSUES**

The data source will be the evaluation component of the CDC nutrition and physical activity obesity prevention grant. This information will be collected in the targeted communities.

**SIGNIFICANCE**

According to the "2002 CDC Pediatric Nutrition Surveillance System," 30 percent of low-income children aged 2-5 years in Iowa are overweight or at risk of becoming overweight and 61 percent of Iowa adults are overweight or obese. In Iowa, the obesity rate in adults has increased by 70 percent from 1990 to 2002.

**OBJECTIVE**

2006	2007	2008	2009	2010
6	12	18	24	36

SP # 7

**PERFORMANCE MEASURE:**

Percent of Medicaid enrolled children ages 9-35 months receiving a blood lead test.

**GOAL**

Increase the percent of Medicaid enrolled children age 9 – 35 months receiving a blood lead test.

**DEFINITION**

The measure of children receiving a blood lead test is identified as a proxy measure for the quality of primary care provide for children.

**Numerator:**

Number of Medicaid enrolled children ages 9-35 months who have received a blood lead test.

**Denominator:**

Number of Medicaid enrolled children ages 9-35 months.

**Units:** Text: 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

8-11: Eliminate elevated blood lead levels in children.

**DATA SOURCES AND DATA ISSUES**

STELLAR (Systematic Tracking of Elevated Lead Levels and Remediation) and Medicaid data match conducted by the IDPH Bureau of Lead Poisoning Prevention - Data on blood lead screening is based upon birth cohorts for children age 9–35 mo. of age. A birth cohort includes children who were born in a given calendar year. The indicator demonstrates the percent of children in this age range who were on Medicaid at some time and received a blood lead test. Children enrolled in Medicaid include those enrolled for at least one month. A child in a given birth cohort must be tested at the age of 9 to 35 months to be counted. The Medicaid population is most vulnerable because the prevalence of lead poisoning in Medicaid children is 2.5 times the prevalence of lead poisoning in non-Medicaid children. Federal and Iowa law require Medicaid children to be tested, and these children have a source of payment for the test.

**SIGNIFICANCE**

Comprehensive health screening services for children include a blood lead test according to a plan developed by IDPH. This plan is consistent with guidance from the AAP, the AAFP, and the CDC. Iowa's screening plan states that all children should be tested for lead at age 12 and 24 mos., and high risk children should be tested at ages 18 mo., 3, 4, and 5 yrs. Iowa law requires that Medicaid children be tested at these ages. The Bureau of Lead Poisoning Prevention assesses rates for children 9-35 mos. of age. Childhood lead poisoning has major effects on the health of children and on community health. Lead has adverse effects on nearly all organ systems, especially on the developing brain and nervous system. At blood lead levels as low as 10 mcg/dl, children's intelligence, hearing, and growth are affected. In a community, the presence of lead-poisoned children can be linked with an increase in the number of children with developmental delays. The presence of lead-poisoned children requires substantial community public health resources for medical and environmental case management services. Most of Iowa's pre-1950 homes contain lead-based paint. Young children who live in pre-1950 homes become lead poisoned when they ingest paint chips, house dust, or exterior soil. Most lead-poisoned children show no visible symptoms, magnifying the importance of having a program to prevent childhood lead poisoning

**OBJECTIVE**

2006	2007	2008	2009	2010
57	62	67	72	77

SP # 8

**PERFORMANCE MEASURE:**

Percent of Medicaid enrolled children ages 1-5 years who receive dental services.

**GOAL**

Assure access to oral health care for low-income children in Iowa.

**DEFINITION**

Children ages 1-5 years old who are enrolled in Medicaid, will have access to dental services.

**Numerator:**

Number of Medicaid enrolled children 1-5 years who receive a dental service.

**Denominator:**

Number of Medicaid enrolled children 1-5 years.

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

21-1 Reduce the proportion of children and adolescents who have dental caries experience in their pr  
21-2 Reduce the proportion of children, adolescents, and adults with untreated dental decay.  
21-10 Increase the proportion of children and adults who use the oral health care system each year.  
21-12 Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year.

**DATA SOURCES AND DATA ISSUES**

HCFA 4.16 Report

**SIGNIFICANCE**

Access to oral health care for children was rated within the top ten priorities of the 2005 Iowa Department of Public Health Maternal and Child Health Needs Assessment. Access to dental care for low-income families is limited due to a number of barriers. These include: lack of financial resources to pay for care, lack of knowledge of importance of good oral health, lack of dentists willing to see children under the age of three, shortage of dentists participating in the Medicaid program, shortage of dentists within the state, and issues of patient compliance.

**OBJECTIVE**

2006	2007	2008	2009	2010
35	36	37	38	39

SP # 9

**PERFORMANCE MEASURE:**

Rate (per 1,000 births) of infant deaths due to prematurity.

**GOAL**

Reduce the rate of infant deaths due to prematurity

**DEFINITION**

Prematurity is defined as delivery before 37 weeks gestational and/or infant weighing 1,000-2,499 grams.

**Numerator:**

Number of infant deaths of pre-term infants.

**Denominator:**

Number of infants (per 1,000) in Iowa.

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

16-1 Reduce fetal and infant deaths.

16-11 Reduce preterm births.

**DATA SOURCES AND DATA ISSUES**

Vital Statistics Data

**SIGNIFICANCE**

No State can afford not to address infant mortality. Nationally the infant mortality rates have climbed from 6.7/1000 to 7.0/1000. Provisional data for calendar year 2004 point to a potential decrease in the Iowa rate of infant mortality per 1,000 births, from 5.7 in 2003 to 5.0 in 2004.

**OBJECTIVE**

2006	2007	2008	2009	2010
3.5	3.5	3.4	3.4	3.3



SP # 10

**PERFORMANCE MEASURE:**

Number of professionals trained on the use of appropriate maternal depression screening tools and the available referral resources.

**GOAL**

Increase the number of professionals trained on use of appropriate maternal depression screening tools.

**DEFINITION**

Assure pregnant and parenting women are screened and referred to appropriate mental health services.

**Numerator:**

Number of professionals trained on maternal depression screening tools.

**Denominator:**

Number of professionals trained

**Units:**    **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

16-5

Reduce maternal illness and complications due to pregnancy.

**DATA SOURCES AND DATA ISSUES**

University of Iowa Center for Depression and Clinical Research and Iowa Department of Public Health Provider Survey.

**SIGNIFICANCE**

Depression is considered an underreported problem. Women report a reluctance to discuss their emotions during the perinatal period due to the perceived stigma associated with it. Many women do not realize that they are suffering from a treatable condition and are often left to deal with the problem on their own. Without appropriate treatment, perinatal depression can dramatically affect women and their families. Data from prenatal care surveys indicate the extent of the problem in Iowa. Over 15 percent of postpartum women completing a survey on their second postpartum day report feeling sad or miserable in the two weeks prior to completing the survey. Health care providers in Iowa indicate that they understand the importance of early screening and identification of perinatal depression. However, they are reluctant to screen and identify clients who may be at-risk for depression, because of the providers' lack of awareness of available resources for client interventions. The Iowa Department of Public Health and the University of Iowa Center for Depression and Clinical Research will be collecting data in the next year to determine the baseline.

**OBJECTIVE**

2006	2007	2008	2009	2010
300	600	900	1200	1500

